All carriers must complete all or portions of all sections
Form must be submitted to USAC and filed with the Federal Communications Commission

IMPORTANT: PLEASE READ INSTRUCTIONS FIRST

361365		143002079	
Study Area Code (SAC (An Eligible Telecommunica		Service Provider Identification Number (SPIN) certification form for each SAC through which it provides Lifeline service).	
2016	MN	Callaway Telephone Company Inc.	
Recertification Year	State	ETC Name	
Arvig		Arvig Enterprises, Inc.	
DBA, Marketing, or Ot (If same as ETC name, list "N	her Branding Name /A" Do <u>not</u> leave blank)	Holding Company Name (If same as ETC name, list "N/A" Do not leave blank)	
Provide a list of all ETCs that at determined in accordance with S owns or controls, is owned or co	Section $3(2)$ of the Communications	Yes No Survival No	
Affiliated ETC's SAC			
See attached workshee	-1	Affiliated ETC's Name	
laws (or partnership agreem comptroller, treasurer, or a compared to the compa	legal document. An officer is tent), and would typically be p	of a position listed in the article of incorporation, articles of a person who occupies a position specified in the corporate by- president, vice president for operations, vice president for finance, er is a sole proprietorship, the owner must sign the certification.	
	sted above has certification pro		
A) Review income and prog that, to the best of my	ram-based eligibility documen knowledge, the company was	ntation prior to enrolling a consumer in the Lifeline program, and s presented with documentation of each consumer's household her enrollment in Lifeline; and/or	
B) Confirm consumer eligi Lifeline administrator pri	bility by relying upon access or to enrolling a consumer in t	s to a state database and/or notice of eligibility from the state the Lifeline program.	
am an officer of the compabove.	any named above. I am autho	orized to make this certification for the Study Area Code listed	
Initial SM			

Do not leave empty blocks. If an ETC has nothing to report in a block, enter a zero.

A	В	C	D	E = (A - B - C - D)
Number of subscribers claimed on February FCC Form 497 of current Form 555 calendar year (February data month)	Number of lines claimed on February FCC Form 497 of current Form 555 calendar year provided to wireline resellers	Number of subscribers claimed on the February FCC Form 497 that were initially enrolled in the current Form 555 calendar year (These subscribers did not have Lifeline service prior to January 1 of the current 555 calendar year.)	Number of subscribers de-enrolled <u>prior</u> to recertification attempt by either the ETC, a state administrator, access to an eligibility database, or by USAC	Number of subscribers ETC is responsible for recertifying for current Form 555 calendar year
- 11	Ø		Ø	10

Recertification Results:

F	G	H = (F-G)	I	J = (H+I)
Number of subscribers ETC contacted directly to recertify eligibility through attestation	Number of subscribers responding to ETC contact	Number of non- responding subscribers	Number of subscribers responding that they are no longer eligible (This should be a subset of Block G.)	Number of subscribers de- enrolled or scheduled to be de-enrolled as a result of non-response or response of ineligibility from ETC recertification attempt
Ø	Ø	Ø	8	Ø

K	L
Number of subscribers whose eligibility was reviewed by state administrator, ETC access to eligibility database, or by USAC	Number of subscribers de-enrolled or scheduled to be de-enrolled as a result of finding of ineligibility by state administrator, ETC access to eligibility database, or USAC
6	4

Note: If any subscriber was reviewed by an ETC accessing a state database or by a state administrator and subsequently contacted directly by the ETC in an attempt to recertify eligibility, those subscribers should be listed in Blocks F through J as appropriate and not in Blocks K and L. As a result, all subscribers subject to recertification who were not de-enrolled prior to the recertification attempt must be accounted for in Block F or Block K.

The total of Block F and Block K should equal the number reported in Block E.

Certification:

Based on the data entered above, initial the certification(s) below that apply. Both Certification A and B may apply depending on the recertification procedures in place for the SAC reporting on this form. If Certification C applies, neither Certification A nor B may apply.

A) I certify that the company listed above has procedures in place to recertify the continued eligibility of all of its Lifeline subscribers, and that, to the best of my knowledge, the company obtained signed certifications from all subscribers attesting to their continuing eligibility for Lifeline. Results are provided in the chart above in Blocks F through J. I am an officer of the company named above. I am authorized to make this certification for the SAC listed above.

Initial

AND/OR

B) I certify that the company listed above has procedures in place to recertify consumer eligibility by relying on:

(List database or name of administrator here)

Results are provided in the chart above in Blocks K through L. I am an officer of the company named above. I am authorized to make this certification for the

SAC listed above.

Initial SM

OR

Initial	

Using the data entered in Section 2, complete the chart below to find the percentage of subscribers de-enrolled for this ETC.

$\mathbf{M} = (\mathbf{F} + \mathbf{K})$	N = (J+L)	$O = ((N \div M) * 100)$
Number of subscribers that the ETC attempted to recertify directly or through a state administrator, ETC access to a state database, or by USAC (This should equal the number reported in Block E)	Number of subscribers de-enrolled or scheduled to be de-enrolled as a result of non-response or ineligibility	Percentage of subscribers de-enrolled or scheduled to be de-enrolled as a result of ineligibility or non-response
6	4	67

Section 4: ETCs Subject to the Non-Usage Requirements

All ETCs must complete the appropriate check-box. ETCs that do not assess and collect a monthly fee from their Lifeline subscribers are subject to the non-usage requirements. ETCs subject to the non-usage requirements must indicate the number of subscribers de-enrolled by month in Section 4. ETCs that only assess a fee but do not collect such fees are subject to the non-usage requirements and must also indicate the number of subscribers de-enrolled by month.

Is the ETC subject to the non-usage requirements? Yes No 🛛

If yes, record the number of subscribers de-enrolled for non-usage by month in Block Q below.

P	Q		
Month	Subscribers De-Enrolled for Non-Usage		
January	0		
February	0		
March	0		
April	0		
May	0		
June	0		
July	0		
August	0		
September	0		
October	0		
November	0		
December	0		
Total Subscribers	0		

Signature Block

Signed,	Staci Malikowski
Certified Online Signature of Officer	Chief Financial Officer Printed Name and Title of Officer
Staci.malikowski@arvig.com	1-31-17
Email Address of Officer	Date
Loretta Tastad	218-346-8446
Person Completing This Certification Form	Contact Phone Number

SAC	Name
361385	East Otter Tail Telephone Company
361491	Twin Valley Telephone Company
361365	Callaway Telephone Company, Inc.
361431	Midwest Telephone Company
361448	Osakis Telephone Company
361453	The Peoples Telephone Co. of Bigfork
361408	Home Telephone Company
361430	Meirose Telephone Company
361472	Redwood County Telephone Company
361443	Loretel Systems Inc
361391	Felton Telephone Company
361374	Arrowhead Communications Corporation
361383	Eagle Valley Telephone Company
361372	Clements Telephone Co.
	Cientens relepitate co.

All carriers must complete all or portions of all sections
Form must be submitted to USAC and filed with the Federal Communications Commission

IMPORTANT: PLEASE READ INSTRUCTIONS FIRST

361372	143002081		
Study Area Code (SAC) (An Eligible Telecommunications Carrier (ETC) must provide a c	Service Provider Identification Number (SPIN) certification form for each SAC through which it provides Lifeline service).		
	Clements Telephone Co.		
Recertification Year State	ETC Name		
Arvig	Arvig Enterprises, Inc.		
DBA, Marketing, or Other Branding Name (If same as ETC name, list "N/A" Do not leave blank)	Holding Company Name (If same as ETC name, list "N/A" Do not leave blank)		
Does the reporting company have affiliated ETCs?	Yes No No		
actermined in accordance with section 5(2) of the Communications.	using page 4 and additional sheets if necessary. Affiliation shall be Act. That Section defines "affiliate" as "a person that (directly or indirectly) nership or control with, another person." 47 U.S.C. § 153(2). See also 47		
Affiliated ETC's SAC	Affiliated ETC's Name		
See attached worksheet			
laws (or partnership agreement), and would typically be p	of a position listed in the article of incorporation, articles of a person who occupies a position specified in the corporate by- resident, vice president for operations, vice president for finance, er is a sole proprietorship, the owner must sign the certification. this section		
I certify that the company listed above has certification pro	ocedures in place to:		
A) Review income and program-based eligibility documen	station prior to enrolling a consumer in the Lifeline program, and		
3) Confirm consumer eligibility by relying upon access Lifeline administrator prior to enrolling a consumer in the	to a state database and/or notice of eligibility from the state he Lifeline program.		
am an officer of the company named above. I am authoubove.	rized to make this certification for the Study Area Code listed		
nitial SM			

Do not leave empty blocks. If an ETC has nothing to report in a block, enter a zero.

A	В	С	D	E = (A - B - C - D)
Number of subscribers claimed on February FCC Form 497 of current Form 555 calendar year (February data month)	Number of lines claimed on February FCC Form 497 of current Form 555 calendar year provided to wireline resellers	Number of subscribers claimed on the February FCC Form 497 that were initially enrolled in the current Form 555 calendar year (These subscribers did not have Lifeline service prior to January 1 of the current 555 calendar year.)	Number of subscribers de-enrolled <u>prior</u> to recertification attempt by either the ETC, a state administrator, access to an eligibility database, or by USAC	Number of subscribers ETC is responsible for recertifying for current Form 555 calendar year
2	Ø	Ø	Ø	2

Recertification Results:

F	G	H = (F-G)	I	J = (H+I)
Number of subscribers ETC contacted directly to recertify eligibility through attestation	Number of subscribers responding to ETC contact	Number of non- responding subscribers	Number of subscribers responding that they are no longer eligible (This should be a subset of Block G.)	Number of subscribers de- enrolled or scheduled to be de-enrolled as a result of non-response or response of ineligibility from ETC recertification attempt
Ø	Ø	Ø	(7)	Of

K	L
Number of subscribers whose eligibility was reviewed by state administrator, ETC access to eligibility database, or by USAC	Number of subscribers de-enrolled or scheduled to be de-enrolled as a result of finding of ineligibility by state administrator, ETC access to eligibility database, or USAC
	1

Note: If any subscriber was reviewed by an ETC accessing a state database or by a state administrator and subsequently contacted directly by the ETC in an attempt to recertify eligibility, those subscribers should be listed in Blocks F through J as appropriate and not in Blocks K and L. As a result, all subscribers subject to recertification who were not de-enrolled prior to the recertification attempt must be accounted for in Block F or Block K.

The total of Block F and Block K should equal the number reported in Block E.

Certification:

Based on the data entered above, initial the certification(s) below that apply. Both Certification A and B may apply depending on the recertification procedures in place for the SAC reporting on this form. If Certification C applies, neither Certification A nor B may apply.

A) I certify that the company listed above has procedures in place to recertify the continued eligibility of all of its Lifeline subscribers, and that, to the best of my knowledge, the company obtained signed certifications from all subscribers attesting to their continuing eligibility for Lifeline. Results are provided in the chart above in Blocks F through J. I am an officer of the company named above. I am authorized to make this certification for the SAC listed above.

Initial

AND/OR

B) I certify that the company listed above has procedures in place to recertify consumer eligibility by relying on:

(List database or name of administrator here)

Results are provided in the chart above in Blocks K through L. I am an officer of the company named above. I am authorized to make this certification for the

SAC listed above.

Initial SM

OR

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In	าราก	1 B		
	IUa	ш		

Using the data entered in Section 2, complete the chart below to find the percentage of subscribers de-enrolled for this ETC.

$\mathbf{M} = (\mathbf{F} + \mathbf{K})$	N = (J+L)	$O = ((N \div M) * 100)$
Number of subscribers that the ETC attempted to recertify directly or through a state administrator, ETC access to a state database, or by USAC (This should equal the number reported in Block E)	Number of subscribers de-enrolled or scheduled to be de-enrolled as a result of non-response or ineligibility	Percentage of subscribers de-enrolled or scheduled to be de-enrolled as a result of ineligibility or non-response
)	100

Section 4: ETCs Subject to the Non-Usage Requirements

All ETCs must complete the appropriate check-box. ETCs that do not assess and collect a monthly fee from their Lifeline subscribers are subject to the non-usage requirements. ETCs subject to the non-usage requirements must indicate the number of subscribers de-enrolled by month in Section 4. ETCs that only assess a fee but do not collect such fees are subject to the non-usage requirements and must also indicate the number of subscribers de-enrolled by month.

Is the ETC subject to the non-usage requirements? Yes No 🗵

If yes, record the number of subscribers de-enrolled for non-usage by month in Block Q below.

P	0
Month	Subscribers De-Enrolled for Non-Usage
January	0
February	0
March	0
April	0
May	0
June	0
July	0
August	0
September	0
October	0
November	0
December	0
Total Subscribers	0

Signature Block

By signing below, I certify that the company listed above is in compliance with all federal Lifeline certification procedures. I am an officer of the company named above. I am authorized to make this certification for the Study Area Code (SAC) listed above.

Signed

2.5,	
Certified Online Signature of Officer	
Staci.malikowsk	i@arvig.com
Email Address of Officer	

Loretta Tastad
Person Completing This Certification Form

Staci Malikowski

Chief Financial Officer
Printed Name and Title of Officer
1-31-17
Date
218-346-8446
218-346-8446

	Name
361385	East Otter Tail Telephone Company
361491	Twin Valley Telephone Company
361365	Callaway Telephone Company, Inc.
361431	Midwest Telephone Company
361448	Osakis Telephone Company
361453	The Peoples Telephone Co. of Bigfork
361408	Home Telephone Company
361430	Melrose Telephone Company
361472	Redwood County Telephone Company
361443	Loretel Systems Inc.
361391	Felton Telephone Company
361374	Arrowhead Communications Corporation
361383	Eagle Valley Telephone Company
361372	Clements Telephone Co.
	Ciements relephone Co.

Annual Lifeline Eligible Telecommunications Carrier Certification Form
All carriers must complete all or portions of all sections Form must be submitted to USAC and filed with the Federal Communications Commission

IMPORTANT: PLEASE READ INSTRUCTIONS FIRST

(An Elig			Service Provider Identification Number (SDD)	
		ions carrier (L1C) must provide a c	Service Provider Identification Number (SPIN) a certification form for each SAC through which it provides Lifeline service).	
Recort	,	MN	Arrowhead Communications Corporation	
Receit	fication Year	State	ETC Name	
Arvig			Arvig Enterprises, Inc.	
DBA, I (If same d	Marketing, or Otl as ETC name, list "N/	ner Branding Name A" Do <u>not</u> leave blank)	Holding Company Name (If same as ETC name, list "N/A" Do not leave blank)	
Does the 1	eporting compa	any have affiliated ETCs?	Yes No No	
order fritteet tr	ols, is owned or co	CHOR 3121 OF INP. COMMUNICATIONS	using page 4 and additional sheets if necessary. Affiliation shall be Act. That Section defines "affiliate" as "a person that (directly or indirectly) nership or control with, another person." 47 U.S.C. § 153(2). See also 47	
Affiliated I	TC's SAC		Affiliated ETC's Name	
See at	ached workshee	t		
laws (or par	tnership agreeme treasurer, or a c	egai document. An officer is ent), and would typically be n	of a position listed in the article of incorporation, articles of a person who occupies a position specified in the corporate by- resident, vice president for operations, vice president for finance, er is a sole proprietorship, the owner must sign the certification.	
I certify that		ted above has certification pro		
A) Review i that, to t	ncome and progr he best of my k	am-based eligibility document mowledge, the company was	tation prior to enrolling a consumer in the Lifeline program, and presented with documentation of each consumer's household ler enrollment in Lifeline; and/or	
B) Confirm Lifeline a	consumer eligib dministrator pric	ility by relying upon access or to enrolling a consumer in th	to a state database and/or notice of eligibility from the state ne Lifeline program.	
I am an offi above.	cer of the compa	my named above. I am autho	rized to make this certification for the Study Area Code listed	
InitialS	1			

Do not leave empty blocks. If an ETC has nothing to report in a block, enter a zero.

A	В	С	D	$\mathbf{E} = (\mathbf{A} - \mathbf{B} - \mathbf{C} - \mathbf{D})$
Number of subscribers claimed on February FCC Form 497 of current Form 555 calendar year (February data month)	Number of lines claimed on February FCC Form 497 of current Form 555 calendar year provided to wireline resellers	Number of subscribers claimed on the February FCC Form 497 that were initially enrolled in the current Form 555 calendar year (These subscribers did not have Lifeline service prior to January 1 of the current 555 calendar year.)	Number of subscribers de-enrolled <u>prior</u> to recertification attempt by either the ETC, a state administrator, access to an eligibility database, or by USAC	Number of subscribers ETC is responsible for recertifying for current Form 555 calendar year
24	Ø	Ø	Ø	74

Recertification Results:

F	G	H = (F-G)	I	J = (H+I)
Number of subscribers ETC contacted directly to recertify eligibility through attestation	Number of subscribers responding to ETC contact	Number of non- responding subscribers	Number of subscribers responding that they are no longer eligible (This should be a subset of Block G.)	Number of subscribers de- enrolled or scheduled to be de-enrolled as a result of non-response or response of ineligibility from ETC recertification attempt
Ø	Ø	Ø	Ø	8

K	L
Number of subscribers whose eligibility was reviewed by state administrator, ETC access to eligibility database, or by USAC	Number of subscribers de-enrolled or scheduled to be de-enrolled as a result of finding of ineligibility by state administrator, ETC access to eligibility database, or USAC
15	9

Note: If any subscriber was reviewed by an ETC accessing a state database or by a state administrator and subsequently contacted directly by the ETC in an attempt to recertify eligibility, those subscribers should be listed in Blocks F through J as appropriate and not in Blocks K and L. As a result, all subscribers subject to recertification who were not de-enrolled prior to the recertification attempt must be accounted for in Block F or Block K.

The total of Block F and Block K should equal the number reported in Block E.

Certification:

Based on the data entered above, initial the certification(s) below that apply. Both Certification A and B may apply depending on the recertification procedures in place for the SAC reporting on this form. If Certification C applies, neither Certification A nor B may apply.

A) I certify that the company listed above has procedures in place to recertify the continued eligibility of all of its Lifeline subscribers, and that, to the best of my knowledge, the company obtained signed certifications from all subscribers attesting to their continuing eligibility for Lifeline. Results are provided in the chart above in Blocks F through J. I am an officer of the company named above. I am authorized to make this certification for the SAC listed above.

Initial

AND/OR

B) I certify that the company listed above has procedures in place to recertify consumer eligibility by relying on:

(List database or name of administrator here)

Results are provided in the chart above in Blocks K through L. I am an officer of the company named above. I am authorized to make this certification for the

SAC listed above.

Initial SM

OR

T * 4	
Init	ומי
	Iau

Using the data entered in Section 2, complete the chart below to find the percentage of subscribers de-enrolled for this ETC.

$\mathbf{M} = (\mathbf{F} + \mathbf{K})$	N = (J+L)	$O = ((N \div M) * 100)$
Number of subscribers that the ETC attempted to recertify directly or through a state administrator, ETC access to a state database, or by USAC (This should equal the number reported in Block E)	Number of subscribers de-enrolled or scheduled to be de-enrolled as a result of non-response or ineligibility	Percentage of subscribers de-enrolled or scheduled to be de-enrolled as a result of ineligibility or non-response
15	9	60

Section 4: ETCs Subject to the Non-Usage Requirements

All ETCs must complete the appropriate check-box. ETCs that do not assess and collect a monthly fee from their Lifeline subscribers are subject to the non-usage requirements. ETCs subject to the non-usage requirements must indicate the number of subscribers de-enrolled by month in Section 4. ETCs that only assess a fee but do not collect such fees are subject to the non-usage requirements and must also indicate the number of subscribers de-enrolled by month.

Is the ETC subject to the non-usage requirements? Yes No 🛛

If yes, record the number of subscribers de-enrolled for non-usage by month in Block $\mathcal Q$ below.

P	Q
Month	Subscribers De-Enrolled for Non-Usage
January	0
February	0
March	0
April	0
May	0
June	0
July	0
August	0
September	0
October	0
November	0
December	0
Total Subscribers	0

Signature Block

Signed,	Staci Malikowski
Certified Online Signature of Officer	Chief Financial Officer Printed Name and Title of Officer
Staci.malikowski@arvig.com	1-31-17_
Email Address of Officer	Date
Loretta Tastad	<u>218-346-8446</u>
Person Completing This Certification Form	Contact Phone Number

SAC	Name
361385	
361491	East Otter Tail Telephone Company Twin Valley Telephone Company
361365	Callaway Telephone Company. Inc.
361431	Midwest Telephone Company
361448	
361453	Osakis Telephone Company The Pearles Talestone On (D) (C)
361408	The Peoples Telephone Co. of Bigfork
361430	Home Telephone Company
361472	Melrose Telephone Company
361443	Redwood County Telephone Company
361391	Loretel Systems Inc.
361374	Felton Telephone Company
361383	Arrowhead Communications Corporation
361372	Eagle Valley Telephone Company
361372	Clements Telephone Co.

All carriers must complete all or portions of all sections
Form must be submitted to USAC and filed with the Federal Communications Commission

IMPORTANT: PLEASE READ INSTRUCTIONS FIRST

204200		
361383 Study Area Code (S.A.C.)	143002089	
Study Area Code (SAC) (An Eligible Telecommunications Carrier (ETC) must provide a	Service Provider Identification Number (SPIN) a certification form for each SAC through which it provides Lifeline service).	
201 6 MN	Eagle Valley Telephone Company	
Recertification Year State	ETC Name	
Arvig	Arvig Enterprises, Inc.	
DBA, Marketing, or Other Branding Name (If same as ETC name, list "N/A" Do not leave blank)	Holding Company Name (If same as ETC name, list "N/A" Do not leave blank)	
Does the reporting company have affiliated ETCs?	Yes No No	
determined in accordance with Section 3(2) of the Communications	C, using page 4 and additional sheets if necessary. Affiliation shall be is Act. That Section defines "affiliate" as "a person that (directly or indirectly) with another person." 47 U.S.C. § 153(2). See also 47	
Affiliated ETC's SAC	Affiliated ETC's Name	
See attached worksheet		
formation, or other similar legal document. An officer i laws (or partnership agreement), and would typically be comptroller, treasurer, or a comparable position. If the fi	is a person who occupies a position specified in the corporate by- president, vice president for operations, vice president for finance, iler is a sole proprietorship, the owner must sign the certification.	
Initial Certification All ETCs must complete	is a person who occupies a position specified in the corporate by- president, vice president for operations, vice president for finance, iler is a sole proprietorship, the owner must sign the certification.	
Initial Certification All ETCs must complete I certify that the company listed above has certification program-based eligibility docume	is a person who occupies a position specified in the corporate by- president, vice president for operations, vice president for finance, iler is a sole proprietorship, the owner must sign the certification. This section recedures in place to: entation prior to enrolling a consumer in the Lifeline program, and as presented with documentation of each consumer's household.	
Initial Certification All ETCs must complete I certify that the company listed above has certification pr A) Review income and program-based eligibility docume that, to the best of my knowledge, the company was income and/or program-based eligibility prior to his or	is a person who occupies a position specified in the corporate by- president, vice president for operations, vice president for finance, iller is a sole proprietorship, the owner must sign the certification. ethis section rocedures in place to: entation prior to enrolling a consumer in the Lifeline program, and as presented with documentation of each consumer's household or her enrollment in Lifeline; and/or ss to a state database and/or notice of eligibility from the state	
Initial Certification All ETCs must complete Section 1: Initial Certification All ETCs must complete I certify that the company listed above has certification program-based eligibility docume that, to the best of my knowledge, the company was income and/or program-based eligibility prior to his or B) Confirm consumer eligibility by relying upon access Lifeline administrator prior to enrolling a consumer in	e this section rocedures in place to: entation prior to enrolling a consumer in the Lifeline program, and as presented with documentation of each consumer's household r her enrollment in Lifeline; and/or ss to a state database and/or notice of eligibility from the state	

Do not leave empty blocks. If an ETC has nothing to report in a block, enter a zero.

A	В	С	D	E = (A - B - C - D)
Number of subscribers claimed on February FCC Form 497 of current Form 555 calendar year (February data month)	Number of lines claimed on February FCC Form 497 of current Form 555 calendar year provided to wireline resellers	Number of subscribers claimed on the February FCC Form 497 that were initially enrolled in the current Form 555 calendar year (These subscribers did not have Lifeline service prior to January 1 of the current 555 calendar year.)	Number of subscribers de-enrolled <u>prior</u> to recertification attempt by either the ETC, a state administrator, access to an eligibility database, or by USAC	Number of subscribers ETC is responsible for recertifying for current Form 555 calendar year
28	Ø	Ø	1	27

Recertification Results:

F	G	H = (F-G)	I	J = (H+1)
Number of subscribers ETC contacted directly to recertify eligibility through attestation	Number of subscribers responding to ETC contact	Number of non- responding subscribers	Number of subscribers responding that they are no longer eligible (This should be a subset of Block G.)	Number of subscribers de- enrolled or scheduled to be de-enrolled as a result of non-response or response of ineligibility from ETC recertification attempt
\mathscr{D}	Ø	Ø	Ø	Ø

K	L
Number of subscribers whose eligibility was reviewed by state administrator, ETC access to eligibility database, or by USAC	Number of subscribers de-enrolled or scheduled to be de-enrolled as a result of finding of ineligibility by state administrator, ETC access to eligibility database, or USAC
18	9

Note: If any subscriber was reviewed by an ETC accessing a state database or by a state administrator and subsequently contacted directly by the ETC in an attempt to recertify eligibility, those subscribers should be listed in Blocks F through J as appropriate and not in Blocks K and L. As a result, all subscribers subject to recertification who were not de-enrolled prior to the recertification attempt must be accounted for in Block F or Block K.

The total of Block F and Block K should equal the number reported in Block E.

Certification:

Based on the data entered above, initial the certification(s) below that apply. Both Certification A and B may apply depending on the recertification procedures in place for the SAC reporting on this form. If Certification C applies, neither Certification A nor B may apply.

A) I certify that the company listed above has procedures in place to recertify the continued eligibility of all of its Lifeline subscribers, and that, to the best of my knowledge, the company obtained signed certifications from all subscribers attesting to their continuing eligibility for Lifeline. Results are provided in the chart above in Blocks F through J. I am an officer of the company named above. I am authorized to make this certification for the SAC listed above.

Initial

AND/OR

B) I certify that the company listed above has procedures in place to recertify consumer eligibility by relying on: $A \subseteq A \subseteq A$

(List database or name of administrator here)

Results are provided in the chart above in Blocks K through L. I am an officer of the company named above. I am authorized to make this certification for the

SAC listed above.

Initial SM

OR

Initial	
111111111111111111111111111111111111111	

Using the data entered in Section 2, complete the chart below to find the percentage of subscribers de-enrolled for this ETC.

$\mathbf{M} = (\mathbf{F} + \mathbf{K})$	N = (J+L)	$O = ((N \div M) * 100)$
Number of subscribers that the ETC attempted to recertify directly or through a state administrator, ETC access to a state database, or by USAC (This should equal the number reported in Block E)	Number of subscribers de-enrolled or scheduled to be de-enrolled as a result of non-response or ineligibility	Percentage of subscribers de-enrolled or scheduled to be de-enrolled as a result of ineligibility or non-response
18	9	50

Section 4: ETCs Subject to the Non-Usage Requirements

All ETCs must complete the appropriate check-box. ETCs that do not assess and collect a monthly fee from their Lifeline subscribers are subject to the non-usage requirements. ETCs subject to the non-usage requirements must indicate the number of subscribers de-enrolled by month in Section 4. ETCs that only assess a fee but do not collect such fees are subject to the non-usage requirements and must also indicate the number of subscribers de-enrolled by month.

Is the ETC subject to the non-usage requirements? Yes No 🗵

If yes, record the number of subscribers de-enrolled for non-usage by month in Block Q below.

P	Q
Month	Subscribers De-Enrolled for Non-Usage
January	0
February	0
March	0
April	0
May	0
June	0
July	0
August	0
September	0
October	0
November	0
December	0
Total Subscribers	0

Signature Block

Signed,	
	Staci Malikowski
Certified Online Signature of Officer	Chief Financial Officer Printed Name and Title of Officer
Staci.malikowski@arvig.com	1-31-17
Email Address of Officer	Date
Loretta Tastad	218-346-8446
Person Completing This Certification Form	Contact Phone Number

	Name
361385	East Otter Tail Telephone Company
361491	Twin Valley Telephone Company
361365	Callaway Telephone Company, Inc.
361431	Midwest Telephone Company
361448	Osakis Telephone Company
361453	The Peoples Telephone Co. of Bigfork
361408	Home Telephone Company
361430	Melrose Telephone Company
361472	Redwood County Telephone Company
361443	Loretel Systems Inc.
361391	Felton Telephone Company
361374	Arrowhead Communications Corporation
361383	Eagle Valley Telephone Company
361372	Clements Telephone Co
	Clements releptione Co

All carriers must complete all or portions of all sections

Form must be submitted to USAC and filed with the Federal Communications Commission

IMPORTANT: PLEASE READ INSTRUCTIONS FIRST

361385		143002091
Study Area Code (SAC)		Service Provider Identification Number (SPIN)
(An Eligible Telecommunicat	tions Carrier (ETC) must provide a c	ertification form for each SAC through which it provides Lifeline service).
2016	MN	East Otter Tail Telephone Company
Recertification Year	State	ETC Name
_Arvig		Arvig Enterprises, Inc.
DBA, Marketing, or Otl (If same as ETC name, list "N.	ner Branding Name (A" Do <u>not leave blank)</u>	Holding Company Name (If same as ETC name, list "N/A" Do not leave blank)
Does the reporting compa	any have affiliated ETCs?	Yes No No
aetermined in accordance with S	ection $3(2)$ of the Communications A	using page 4 and additional sheets if necessary. Affiliation shall be Act. That Section defines "affiliate" as "a person that (directly or indirectly) nership or control with, another person." 47 U.S.C. § 153(2). See also 47
Affiliated ETC's SAC		Affiliated ETC's Name
See attached workshee	et	
laws (or partnership agreem comptroller, treasurer, or a c	legal document. An officer is ent), and would typically be p	of a position listed in the article of incorporation, articles of a person who occupies a position specified in the corporate by- resident, vice president for operations, vice president for finance, er is a sole proprietorship, the owner must sign the certification.
I certify that the company lis	ted above has certification pro-	cedures in place to:
A) Review income and programmers that, to the best of my I	ram-based eligibility document knowledge, the company was	tation prior to enrolling a consumer in the Lifeline program, and presented with documentation of each consumer's household her enrollment in Lifeline; and/or
B) Confirm consumer eligible Lifeline administrator prior	pility by relying upon access or to enrolling a consumer in the	to a state database and/or notice of eligibility from the state ne Lifeline program.
am an officer of the compa	any named above. I am autho	rized to make this certification for the Study Area Code listed
Initial SM		

Do not leave empty blocks. If an ETC has nothing to report in a block, enter a zero.

A	В	С	D	$\mathbf{E} = (\mathbf{A} - \mathbf{B} - \mathbf{C} - \mathbf{D})$
Number of subscribers claimed on February FCC Form 497 of current Form 555 calendar year (February data month)	Number of lines claimed on February FCC Form 497 of current Form 555 calendar year provided to wireline resellers	Number of subscribers claimed on the February FCC Form 497 that were initially enrolled in the current Form 555 calendar year (These subscribers did not have Lifeline service prior to January 1 of the current 555 calendar year.)	Number of subscribers de-enrolled <u>prior</u> to recertification attempt by either the ETC, a state administrator, access to an eligibility database, or by USAC	Number of subscribers ETC is responsible for recertifying for current Form 555 calendar year
388	Ø	31	19	338

Recertification Results:

F	G	H = (F-G)	I	J = (H+I)
Number of subscribers ETC contacted directly to recertify eligibility through attestation	Number of subscribers responding to ETC contact	Number of non- responding subscribers	Number of subscribers responding that they are no longer eligible (This should be a subset of Block G.)	Number of subscribers de- enrolled or scheduled to be de-enrolled as a result of non-response or response of ineligibility from ETC recertification attempt
	Ø	Ø	Ø	Ø

K	L
Number of subscribers whose eligibility was reviewed by state administrator, ETC access to eligibility database, or by USAC	Number of subscribers de-enrolled or scheduled to be de-enrolled as a result of finding of ineligibility by state administrator, ETC access to eligibility database, or USAC
208	130

Note: If any subscriber was reviewed by an ETC accessing a state database or by a state administrator and subsequently contacted directly by the ETC in an attempt to recertify eligibility, those subscribers should be listed in Blocks F through J as appropriate and not in Blocks K and L. As a result, all subscribers subject to recertification who were not de-enrolled prior to the recertification attempt must be accounted for in Block F or Block K.

The total of Block F and Block K should equal the number reported in Block E.

Certification:

Based on the data entered above, initial the certification(s) below that apply. Both Certification A and B may apply depending on the recertification procedures in place for the SAC reporting on this form. If Certification C applies, neither Certification A nor B may apply.

A) I certify that the company listed above has procedures in place to recertify the continued eligibility of all of its Lifeline subscribers, and that, to the best of my knowledge, the company obtained signed certifications from all subscribers attesting to their continuing eligibility for Lifeline. Results are provided in the chart above in Blocks F through J. I am an officer of the company named above. I am authorized to make this certification for the SAC listed above.

Initial _____

AND/OR

B) I certify that the company listed above has procedures in place to recertify consumer eligibility by relying on:

(List database or name of administrator here)

Results are provided in the chart above in Blocks K through L. I am an officer of the company named above. I am authorized to make this certification for the SAC listed above.

T ... I ON

Initial SM

OR

Initial	

Using the data entered in Section 2, complete the chart below to find the percentage of subscribers de-enrolled for this ETC.

$\mathbf{M} = (\mathbf{F} + \mathbf{K})$	N = (J+L)	$O = ((N \div M) * 100)$
Number of subscribers that the ETC attempted to recertify directly or through a state administrator, ETC access to a state database, or by USAC (This should equal the number reported in Block E)	Number of subscribers de-enrolled or scheduled to be de-enrolled as a result of non-response or ineligibility	Percentage of subscribers de-enrolled or scheduled to be de-enrolled as a result of ineligibility or non-response
208	130	63

Section 4: ETCs Subject to the Non-Usage Requirements

All ETCs must complete the appropriate check-box. ETCs that do not assess and collect a monthly fee from their Lifeline subscribers are subject to the non-usage requirements. ETCs subject to the non-usage requirements must indicate the number of subscribers de-enrolled by month in Section 4. ETCs that only assess a fee but do not collect such fees are subject to the non-usage requirements and must also indicate the number of subscribers de-enrolled by month.

Is the ETC subject to the non-usage requirements? Yes No 🗵

If yes, record the number of subscribers de-enrolled for non-usage by month in $Block\ Q$ below.

P	Q
Month	Subscribers De-Enrolled for Non-Usage
January	0
February	0
March	0
April	0
May	0
June	0
July	0
August	0
September	0
October	0
November	0
December	0
Total Subscribers	0

Signature Block

Signed,	0
	Staci Malikowski
Certified Online Signature of Officer	Chief Financial Officer Printed Name and Title of Officer
Staci.malikowski@arvig.com	1-31-17
Email Address of Officer	Date
Loretta Tastad	<u>218-346-8446</u>
Person Completing This Certification Form	Contact Phone Number

AC	Name
361385	East Otter Tail Telephone Company
361491	Twin Valley Telephone Company
361365	Callaway Telephone Company, Inc.
361431	Midwest Telephone Company
361448	Osakis Telephone Company
361453	The Peoples Telephone Co. of Bigfork
361408	Home Telephone Company
361430	Melrose Telephone Company
361472	Redwood County Telephone Company
361443	Loretel Systems Inc.
361391	Felton Telephone Company
361374	Arrowhead Communications Corporation
361383	Eagle Valley Telephone Company
361372	Clements Telephone Co.
	Ciemenis releptione Co.

All carriers must complete all or portions of all sections
Form must be submitted to USAC and filed with the Federal Communications Commission

IMPORTANT: PLEASE READ INSTRUCTIONS FIRST

361391		143002096		
Study Area Code (SAC) (An Eligible Telecommunications Carrier (ETC) must provide a ce		Service Provider Identification Number (SPIN) certification form for each SAC through which it provides Lifeline service).		
2016	MN	Felton Telephone Company		
Recertification Year	State	ETC Name		
Arvig		Arvig Enterprises, Inc.		
DBA, Marketing, or Other Branding Name (If same as ETC name, list "N/A" Do not leave blank)		Holding Company Name (If same as ETC name, list "N/A" Do not leave blank)		
Does the reporting compa	any have affiliated ETCs?	Yes 🔀 No 🗖		
ueterminea in accordance with 5	ection 3(2) of the Communications	C, using page 4 and additional sheets if necessary. Affiliation shall be s Act. That Section defines "affiliate" as "a person that (directly or indirectly) wnership or control with, another person." 47 U.S.C. § 153(2). See also 47		
Affiliated ETC's SAC		Affiliated ETC's Name		
See attached workshee	et			
laws (or partnership agreeme comptroller, treasurer, or a c	legal document. An officer is ent), and would typically be	s of a position listed in the article of incorporation, articles of s a person who occupies a position specified in the corporate by president, vice president for operations, vice president for finance ler is a sole proprietorship, the owner must sign the certification.		
I certify that the company lis	ted above has certification pr	ocedures in place to:		
A) Review income and programmer that, to the best of my leading to the best of my leading to the control of the	ram-based eligibility docume mowledge, the company wa	entation prior to enrolling a consumer in the Lifeline program, and as presented with documentation of each consumer's household ther enrollment in Lifeline; and/or		
B) Confirm consumer eligib Lifeline administrator prio	pility by relying upon acces or to enrolling a consumer in	is to a state database and/or notice of eligibility from the state the Lifeline program.		
am an officer of the comparabove.	any named above. I am auth	orized to make this certification for the Study Area Code listed		
Initial SM				

Do not leave empty blocks. If an ETC has nothing to report in a block, enter a zero.

A	В	С	D	E = (A - B - C - D)
Number of subscribers claimed on February FCC Form 497 of current Form 555 calendar year (February data month)	Number of lines claimed on February FCC Form 497 of current Form 555 calendar year provided to wireline resellers	Number of subscribers claimed on the February FCC Form 497 that were initially enrolled in the current Form 555 calendar year (These subscribers did not have Lifeline service prior to January 1 of the current 555 calendar year.)	Number of subscribers de-enrolled <u>prior</u> to recertification attempt by either the ETC, a state administrator, access to an eligibility database, or by USAC	Number of subscribers ETC is responsible for recertifying for current Form 555 calendar year
6	Ø	Ø	Ø	6

Recertification Results:

F	G	H = (F-G)	I	J = (H+I)
Number of subscribers ETC contacted directly to recertify eligibility through attestation	Number of subscribers responding to ETC contact	Number of non- responding subscribers	Number of subscribers responding that they are no longer eligible (This should be a subset of Block G.)	Number of subscribers de- enrolled or scheduled to be de-enrolled as a result of non-response or response of ineligibility from ETC recertification attempt
Ø	Ø	Ø	Ø	Ø

K	L
Number of subscribers whose eligibility was reviewed by state administrator, ETC access to eligibility database, or by USAC	Number of subscribers de-enrolled or scheduled to be de-enrolled as a result of finding of ineligibility by state administrator, ETC access to eligibility database, or USAC
4	2

Note: If any subscriber was reviewed by an ETC accessing a state database or by a state administrator and subsequently contacted directly by the ETC in an attempt to recertify eligibility, those subscribers should be listed in Blocks F through J as appropriate and not in Blocks K and L. As a result, all subscribers subject to recertification who were not de-enrolled prior to the recertification attempt must be accounted for in Block F or Block K.

The total of Block F and Block K should equal the number reported in Block E.

Certification:

Based on the data entered above, initial the certification(s) below that apply. Both Certification A and B may apply depending on the recertification procedures in place for the SAC reporting on this form. If Certification C applies, neither Certification A nor B may apply.

A) I certify that the company listed above has procedures in place to recertify the continued eligibility of all of its Lifeline subscribers, and that, to the best of my knowledge, the company obtained signed certifications from all subscribers attesting to their continuing eligibility for Lifeline. Results are provided in the chart above in Blocks F through J. I am an officer of the company named above. I am authorized to make this certification for the SAC listed above.

Initial ____

AND/OR

B) I certify that the company listed above has procedures in place to recertify consumer eligibility by relying on:

(List database or name of administrator here)

Results are provided in the chart above in Blocks K through L. I am an officer of the company named above. I am authorized to make this certification for the

SAC listed above.

Initial SM

OR

Initial

Using the data entered in Section 2, complete the chart below to find the percentage of subscribers de-enrolled for this ETC.

$\mathbf{M} = (\mathbf{F} + \mathbf{K})$	N = (J+L)	$O = ((N \div M) * 100)$
Number of subscribers that the ETC attempted to recertify directly or through a state administrator, ETC access to a state database, or by USAC (This should equal the number reported in Block E)	Number of subscribers de-enrolled or scheduled to be de-enrolled as a result of non-response or ineligibility	Percentage of subscribers de-enrolled or scheduled to be de-enrolled as a result of ineligibility or non-response
4	3	50

Section 4: ETCs Subject to the Non-Usage Requirements

All ETCs must complete the appropriate check-box. ETCs that do not assess and collect a monthly fee from their Lifeline subscribers are subject to the non-usage requirements. ETCs subject to the non-usage requirements must indicate the number of subscribers de-enrolled by month in Section 4. ETCs that only assess a fee but do not collect such fees are subject to the non-usage requirements and must also indicate the number of subscribers de-enrolled by month.

Is the ETC subject to the non-usage requirements? Yes No

If yes, record the number of subscribers de-enrolled for non-usage by month in Block Q below.

P	Q
Month	Subscribers De-Enrolled for Non-Usage
January	0
February	0
March	0
April	0
May	0
June	0
July	0
August	0
September	0
October	0
November	0
December	0
Total Subscribers	0

Signature Block

Signed,	
oignou,	Staci Malikowski
Certified Online	— Chief Financial Officer
Signature of Officer	Printed Name and Title of Officer
Staci.malikowski@arvig.com	1-31-17
Email Address of Officer	Date
Loretta Tastad	218-346-8446
Person Completing This Certification Form	Contact Phone Number

SAC	Name
361385	East Otter Tail Telephone Company
361491	Twin Valley Telephone Company
361365	Callaway Telephone Company, Inc.
361431	Midwest Telephone Company
361448	Osakis Telephone Company
361453	The Peoples Telephone Co. of Bigfork
361408	Home Telephone Company
361430	Melrose Telephone Company
361472	Redwood County Telephone Company
361443	Loretel Systems Inc.
361391	Felton Telephone Company
361374	Arrowhead Communications Corporation
361383	Fagle Valley Telephone Company
361372	Clements Telephone Co.

All carriers must complete all or portions of all sections
Form must be submitted to USAC and filed with the Federal Communications Commission

IMPORTANT: PLEASE READ INSTRUCTIONS FIRST

361408	143002104
Study Area Code (SAC) (An Eligible Telecommunications Carrier (ETC) must provide a c	Service Provider Identification Number (SPIN) rertification form for each SAC through which it provides Lifeline service).
201 6 MN	Home Telephone Company
Recertification Year State	ETC Name
Arvig	Arvig Enterprises, Inc.
DBA, Marketing, or Other Branding Name (If same as ETC name, list "N/A" Do not leave blank)	Holding Company Name (If same as ETC name, list "N/A" Do not leave blank)
Does the reporting company have affiliated ETCs? Provide a list of all ETCs that are affiliated with the reporting ETC,	Yes No using page 4 and additional sheets if necessary. Affiliation shall be
determined in accordance with Section 3(2) of the Communications 2	Act. That Section defines "affiliate" as "a person that (directly or indirectly) nership or control with, another person." 47 U.S.C. § 153(2). See also 47
Affiliated ETC's SAC	Affiliated ETC's Name
See attached worksheet	
formation, or other similar legal document. An officer is laws (or partnership agreement), and would typically be p comptroller, treasurer, or a comparable position. If the file	of a position listed in the article of incorporation, articles of a person who occupies a position specified in the corporate by- resident, vice president for operations, vice president for finance, er is a sole proprietorship, the owner must sign the certification.
Section 1: Initial Certification All ETCs must complete to	
I certify that the company listed above has certification pro	cedures in place to:
A) Review income and program-based eligibility documen that, to the best of my knowledge, the company was income and/or program-based eligibility prior to his or h	tation prior to enrolling a consumer in the Lifeline program, and s presented with documentation of each consumer's household ner enrollment in Lifeline; and/or
B) Confirm consumer eligibility by relying upon access Lifeline administrator prior to enrolling a consumer in the consumer of the consumer in	to a state database and/or notice of eligibility from the state he Lifeline program.
I am an officer of the company named above. I am autho above.	orized to make this certification for the Study Area Code listed
Initial SM	

Do not leave empty blocks. If an ETC has nothing to report in a block, enter a zero.

A	В	С	D	$\mathbf{E} = (\mathbf{A} - \mathbf{B} - \mathbf{C} - \mathbf{D})$
Number of subscribers claimed on February FCC Form 497 of current Form 555 calendar year (February data month)	Number of lines claimed on February FCC Form 497 of current Form 555 calendar year provided to wireline resellers	Number of subscribers claimed on the February FCC Form 497 that were initially enrolled in the current Form 555 calendar year (These subscribers did not have Lifeline service prior to January 1 of the current 555 calendar year.)	Number of subscribers de-enrolled <u>prior</u> to recertification attempt by either the ETC, a state administrator, access to an eligibility database, or by USAC	Number of subscribers ETC is responsible for recertifying for current Form 555 calendar year
18	Ø	Ø	Ø	18

Recertification Results:

F	G	H = (F-G)	I	J = (H+I)
Number of subscribers ETC contacted directly to recertify eligibility through attestation	Number of subscribers responding to ETC contact	Number of non- responding subscribers	Number of subscribers responding that they are no longer eligible (This should be a subset of Block G.)	Number of subscribers de- enrolled or scheduled to be de-enrolled as a result of non-response or response of ineligibility from ETC recertification attempt
Ø	Ø	Ø	Ø	0

K	L
Number of subscribers whose eligibility was reviewed by state administrator, ETC access to eligibility database, or by USAC	Number of subscribers de-enrolled or scheduled to be de-enrolled as a result of finding of ineligibility by state administrator, ETC access to eligibility database, or USAC
14	4

Note: If any subscriber was reviewed by an ETC accessing a state database or by a state administrator and subsequently contacted directly by the ETC in an attempt to recertify eligibility, those subscribers should be listed in Blocks F through J as appropriate and not in Blocks K and L. As a result, all subscribers subject to recertification who were not de-enrolled prior to the recertification attempt must be accounted for in Block F or Block K.

The total of Block F and Block K should equal the number reported in Block E.

Certification:

Based on the data entered above, initial the certification(s) below that apply. Both Certification A and B may apply depending on the recertification procedures in place for the SAC reporting on this form. If Certification C applies, neither Certification A nor B may apply.

A) I certify that the company listed above has procedures in place to recertify the continued eligibility of all of its Lifeline subscribers, and that, to the best of my knowledge, the company obtained signed certifications from all subscribers attesting to their continuing eligibility for Lifeline. Results are provided in the chart above in Blocks F through J. I am an officer of the company named above. I am authorized to make this certification for the SAC listed above.

Initial

AND/OR

B) I certify that the company listed above has procedures in place to recertify consumer eligibility by relying on:

(List database or name of administrator here)

Results are provided in the chart above in Blocks K through L. I am an officer of the company named above. I am authorized to make this certification for the

SAC listed above.

Initial SM

OR

Initial	
THILIMA	

Using the data entered in Section 2, complete the chart below to find the percentage of subscribers de-enrolled for this ETC.

$\mathbf{M} = (\mathbf{F} + \mathbf{K})$	N = (J+L)	$O = ((N \div M) * 100)$
Number of subscribers that the ETC attempted to recertify directly or through a state administrator, ETC access to a state database, or by USAC (This should equal the number reported in Block E)	Number of subscribers de-enrolled or scheduled to be de-enrolled as a result of non-response or ineligibility	Percentage of subscribers de-enrolled or scheduled to be de-enrolled as a result of ineligibility or non-response
14	4	29

Section 4: ETCs Subject to the Non-Usage Requirements

All ETCs must complete the appropriate check-box. ETCs that do not assess and collect a monthly fee from their Lifeline subscribers are subject to the non-usage requirements. ETCs subject to the non-usage requirements must indicate the number of subscribers de-enrolled by month in Section 4. ETCs that only assess a fee but do not collect such fees are subject to the non-usage requirements and must also indicate the number of subscribers de-enrolled by month.

Is the ETC subject to the non-usage requirements? Yes No X

If yes, record the number of subscribers de-enrolled for non-usage by month in Block Q below.

P	Q
Month	Subscribers De-Enrolled for Non-Usage
January	0
February	0
March	0
April	0
May	0
June	0
July	0
August	0
September	0
October	0
November	0
December	0
Total Subscribers	0

Signature Block

Signed,	Staci Malikowski	
Certified Online Signature of Officer	Chief Financial Officer Printed Name and Title of Officer	
Staci.malikowski@arvig.com	1-31-17	
Email Address of Officer	Date	
Loretta Tastad	218-346-8446	
Person Completing This Certification Form	Contact Phone Number	

SAC	Name
361385	East Otter Tail Telephone Company
361491	Twin Valley Telephone Company
361365	Callaway Telephone Company, Inc.
361431	Midwest Telephone Company
361448	Osakis Telephone Company
361453	The Peoples Telephone Co. of Bigfork
361408	Home Telephone Company
361430	Melrose Telephone Company
361472	Redwood County Telephone Company
361443	Loretel Systems Inc.
361391	Felton Telephone Company
361374	Arrowhead Communications Corporation
361383	Eagle Valley Telephone Company
361372	Clements Telephone Co.

All carriers must complete all or portions of all sections
Form must be submitted to USAC and filed with the Federal Communications Commission

IMPORTANT: PLEASE READ INSTRUCTIONS FIRST

Service Provider Identification Number (SPIN) fication form for each SAC through which it provides Lifeline service). Loretel Systems, Inc. ETC Name Arvig Enterprises, Inc. Holding Company Name (If same as ETC name, list "N/A" Do not leave blank) Yes No Ing page 4 and additional sheets if necessary. Affiliation shall be That Section defines "affiliate" as "a person that (directly or indirectly) ship or control with, another person." 47 U.S.C. § 153(2). See also 47 ffiliated ETC's Name
Loretel Systems, Inc. ETC Name Arvig Enterprises, Inc. Holding Company Name (If same as ETC name, list "N/A" Do not leave blank) Yes No Ing page 4 and additional sheets if necessary. Affiliation shall be That Section defines "affiliate" as "a person that (directly or indirectly) ship or control with, another person." 47 U.S.C. § 153(2). See also 47
Arvig Enterprises, Inc. Holding Company Name (If same as ETC name, list "N/A" Do not leave blank) Yes No No ng page 4 and additional sheets if necessary. Affiliation shall be That Section defines "affiliate" as "a person that (directly or indirectly) ship or control with, another person." 47 U.S.C. § 153(2). See also 47
Arvig Enterprises, Inc. Holding Company Name (If same as ETC name, list "N/A" Do not leave blank) Yes No Ing page 4 and additional sheets if necessary. Affiliation shall be That Section defines "affiliate" as "a person that (directly or indirectly) ship or control with, another person." 47 U.S.C. § 153(2). See also 47
Holding Company Name (If same as ETC name, list "N/A" Do not leave blank) Yes No No Same as ETC name, list "N/A" Do not leave blank) No Same as ETC name, list "N/A" Do not leave blank) Yes No Same as ETC name, list "N/A" Do not leave blank) If g page 4 and additional sheets if necessary. Affiliation shall be a list of the same as "a person that (directly or indirectly) ship or control with, another person." 47 U.S.C. § 153(2). See also 47
Holding Company Name (If same as ETC name, list "N/A" Do not leave blank) Yes No No Same as ETC name, list "N/A" Do not leave blank) No Same as ETC name, list "N/A" Do not leave blank) Yes No Same as ETC name, list "N/A" Do not leave blank) If g page 4 and additional sheets if necessary. Affiliation shall be a list of the same as "a person that (directly or indirectly) ship or control with, another person." 47 U.S.C. § 153(2). See also 47
ng page 4 and additional sheets if necessary. Affiliation shall be That Section defines "affiliate" as "a person that (directly or indirectly) ship or control with, another person." 47 U.S.C. § 153(2). See also 47
ng page 4 and additional sheets if necessary. Affiliation shall be That Section defines "affiliate" as "a person that (directly or indirectly) ship or control with, another person." 47 U.S.C. § 153(2). See also 47
ffiliated ETC's Name
innated by C. S. Ivaine
a position listed in the article of incorporation, articles of person who occupies a position specified in the corporate by ident, vice president for operations, vice president for finances a sole proprietorship, the owner must sign the certification.
dures in place to:
ion prior to enrolling a consumer in the Lifeline program, and resented with documentation of each consumer's household enrollment in Lifeline; and/or
a state database and/or notice of eligibility from the state Lifeline program.
ed to make this certification for the Study Area Code listed

Do not leave empty blocks. If an ETC has nothing to report in a block, enter a zero.

A	В	С	D	$\mathbf{E} = (\mathbf{A} - \mathbf{B} - \mathbf{C} - \mathbf{D})$
Number of subscribers claimed on February FCC Form 497 of current Form 555 calendar year (February data month)	Number of lines claimed on February FCC Form 497 of current Form 555 calendar year provided to wireline resellers	Number of subscribers claimed on the February FCC Form 497 that were initially enrolled in the current Form 555 calendar year (These subscribers did not have Lifetine service prior to January 1 of the current 555 calendar year.)	Number of subscribers de-enrolled <u>prior</u> to recertification attempt by either the ETC, a state administrator, access to an eligibility database, or by USAC	Number of subscribers ETC is responsible for recertifying for current Form 555 calendar year
155	Ø	14	8	13.3

Recertification Results:

F	G	H = (F-G)	I	J = (H+I)
Number of subscribers ETC contacted directly to recertify eligibility through attestation	Number of subscribers responding to ETC contact	Number of non- responding subscribers	Number of subscribers responding that they are no longer eligible (This should be a subset of Block G.)	Number of subscribers de- enrolled or scheduled to be de-enrolled as a result of non-response or response of ineligibility from ETC recertification attempt
Ø	Ø	Ø	Ø	Ø.

K	L
Number of subscribers whose eligibility was reviewed by state administrator, ETC access to eligibility database, or by USAC	Number of subscribers de-enrolled or scheduled to be de-enrolled as a result of finding of ineligibility by state administrator, ETC access to eligibility database, or USAC
80	53

Note: If any subscriber was reviewed by an ETC accessing a state database or by a state administrator and subsequently contacted directly by the ETC in an attempt to recertify eligibility, those subscribers should be listed in Blocks F through J as appropriate and not in Blocks K and L. As a result, all subscribers subject to recertification who were not de-enrolled prior to the recertification attempt must be accounted for in Block F or Block K.

The total of Block F and Block K should equal the number reported in Block E.

Certification:

Based on the data entered above, initial the certification(s) below that apply. Both Certification A and B may apply depending on the recertification procedures in place for the SAC reporting on this form. If Certification C applies, neither Certification A nor B may apply.

A) I certify that the company listed above has procedures in place to recertify the continued eligibility of all of its Lifeline subscribers, and that, to the best of my knowledge, the company obtained signed certifications from all subscribers attesting to their continuing eligibility for Lifeline. Results are provided in the chart above in Blocks F through J. I am an officer of the company named above. I am authorized to make this certification for the SAC listed above.

Initial

AND/OR

B) I certify that the company listed above has procedures in place to recertify consumer eligibility by relying on:

(List database or name of administrator here)

Results are provided in the chart above in Blocks K through L. I am an officer of the company named above. I am authorized to make this certification for the

SAC listed above.

Initial SM

OR

Initia	l
--------	---

Using the data entered in Section 2, complete the chart below to find the percentage of subscribers de-enrolled for this ETC.

$\mathbf{M} = (\mathbf{F} + \mathbf{K})$	N = (J+L)	$O = ((N \div M) * 100)$
Number of subscribers that the ETC attempted to recertify directly or through a state administrator, ETC access to a state database, or by USAC (This should equal the number reported in Block E)	Number of subscribers de-enrolled or scheduled to be de-enrolled as a result of non-response or ineligibility	Percentage of subscribers de-enrolled or scheduled to be de-enrolled as a result of ineligibility or non-response
80	53	67

Section 4: ETCs Subject to the Non-Usage Requirements

All ETCs must complete the appropriate check-box. ETCs that do not assess and collect a monthly fee from their Lifeline subscribers are subject to the non-usage requirements. ETCs subject to the non-usage requirements must indicate the number of subscribers de-enrolled by month in Section 4. ETCs that only assess a fee but do not collect such fees are subject to the non-usage requirements and must also indicate the number of subscribers de-enrolled by month.

Is the ETC subject to the non-usage requirements? Yes No 🗵

If yes, record the number of subscribers de-enrolled for non-usage by month in Block Q below.

P	Q
Month	Subscribers De-Enrolled for Non-Usage
January	0
February	0
March	0
April	0
May	0
June	0
July	0
August	0
September	0
October	0
November	0
December	0
Total Subscribers	0

Signature Block

Signed,	
	Staci Malikowski
Certified Online Signature of Officer	Chief Financial Officer Printed Name and Title of Officer
Staci.malikowski@arvig.com	1-31-17
Email Address of Officer	Date
Loretta Tastad	218-346-8446
Person Completing This Certification Form	Contact Phone Number

SAC	Name
361385	East Otter Tail Telephone Company
361491	Twin Valley Telephone Company
361365	Callaway Telephone Company, Inc.
361431	Midwest Telephone Company
361448	Osakis Telephone Company
361453	The Peoples Telephone Co. of Bigfork
361408	Home Telephone Company
361430	Melrose Telephone Company
361472	Redwood County Telephone Company
361443	Loretel Systems Inc.
361391	Felton Telephone Company
361374	Arrowhead Communications Corporation
361383	Eagle Valley Telephone Company
361372	Clements Telephone Co.

All carriers must complete all or portions of all sections
Form must be submitted to USAC and filed with the Federal Communications Commission

IMPORTANT: PLEASE READ INSTRUCTIONS FIRST

361430		143002117
Study Area Code (SAC) (An Fligible Telegrammunications Country (FTC) must pushish a		Service Provider Identification Number (SPIN)
(In Engine Telecommunica	nons Carrier (ETC) musi provide a c	ertification form for each SAC through which it provides Lifeline service).
201 b	MN	Melrose Telephone Company
Recertification Year	State	ETC Name
Arvig		Arvig Enterprises, Inc.
DBA, Marketing, or Otl (If same as ETC name, list "N/	her Branding Name A" Do <u>not l</u> eave blank)	Holding Company Name (If same as ETC name, list "N/A" Do not leave blank)
	any have affiliated ETCs?	Yes No No
determined in accordance with S	ection $3(2)$ of the Communications 2	using page 4 and additional sheets if necessary. Affiliation shall be Act. That Section defines "affiliate" as "a person that (directly or indirectly) nership or control with, another person." 47 U.S.C. § 153(2). See also 47
Affiliated ETC's SAC		Affiliated ETC's Name
See attached workshee	et	
laws (or partnership agreem comptroller, treasurer, or a c	legal document. An officer is ent), and would typically be propertied to the properties of the propert	of a position listed in the article of incorporation, articles of a person who occupies a position specified in the corporate by- resident, vice president for operations, vice president for finance, or is a sole proprietorship, the owner must sign the certification.
I certify that the company lis	ted above has certification pro-	cedures in place to:
A) Review income and prog that, to the best of my l	ram-based eligibility document knowledge, the company was	tation prior to enrolling a consumer in the Lifeline program, and presented with documentation of each consumer's household her enrollment in Lifeline; and/or
B) Confirm consumer eligil Lifeline administrator pri	bility by relying upon access or to enrolling a consumer in the	to a state database and/or notice of eligibility from the state ne Lifeline program.
am an officer of the compabove.	any named above. I am autho	rized to make this certification for the Study Area Code listed
nitial SM		

Do not leave empty blocks. If an ETC has nothing to report in a block, enter a zero.

A	В	С	D	E = (A - B - C - D)
Number of subscribers claimed on February FCC Form 497 of current Form 555 calendar year (February data month)	Number of lines claimed on February FCC Form 497 of current Form 555 calendar year provided to wireline resellers	Number of subscribers claimed on the February FCC Form 497 that were initially enrolled in the current Form 555 calendar year (These subscribers did not have Lifeline service prior to January 1 of the current 555 calendar year.)	Number of subscribers de-enrolled <u>prior</u> to recertification attempt by either the ETC, a state administrator, access to an eligibility database, or by USAC	Number of subscribers ETC is responsible for recertifying for current Form 555 calendar year
209	Ø	7	8	194

Recertification Results:

F	G	H = (F-G)	I	J = (H+I)
Number of subscribers ETC contacted directly to recertify eligibility through attestation	Number of subscribers responding to ETC contact	Number of non- responding subscribers	Number of subscribers responding that they are no longer eligible (This should be a subset of Block G.)	Number of subscribers de- enrolled or scheduled to be de-enrolled as a result of non-response or response of ineligibility from ETC recertification attempt
Ø	Ø	Ø	Ø	Ø.

K	L
Number of subscribers whose eligibility was reviewed by state administrator, ETC access to eligibility database, or by USAC	Number of subscribers de-enrolled or scheduled to be de-enrolled as a result of finding of ineligibility by state administrator, ETC access to eligibility database, or USAC
126	68

Note: If any subscriber was reviewed by an ETC accessing a state database or by a state administrator and subsequently contacted directly by the ETC in an attempt to recertify eligibility, those subscribers should be listed in Blocks F through J as appropriate and not in Blocks K and L. As a result, all subscribers subject to recertification who were not de-enrolled prior to the recertification attempt must be accounted for in Block F or Block K.

The total of Block F and Block K should equal the number reported in Block E.

Certification:

Based on the data entered above, initial the certification(s) below that apply. Both Certification A and B may apply depending on the recertification procedures in place for the SAC reporting on this form. If Certification C applies, neither Certification A nor B may apply.

A) I certify that the company listed above has procedures in place to recertify the continued eligibility of all of its Lifeline subscribers, and that, to the best of my knowledge, the company obtained signed certifications from all subscribers attesting to their continuing eligibility for Lifeline. Results are provided in the chart above in Blocks F through J. I am an officer of the company named above. I am authorized to make this certification for the SAC listed above.

Initial _____

AND/OR

B) I certify that the company listed above has procedures in place to recertify consumer eligibility by relying on:

(List database or name of administrator here)

Results are provided in the chart above in Blocks K through L. I am an officer of the company named above. I am authorized to make this certification for the

SAC listed above.

Initial <u>SM</u>

OR

I certify that my company did not claim federal low income support for any Lifeline subscribers for the February Form 497 data month for the current Form 555 calendar year. I am an officer of the company named above. I am authorized to make this certification for the SAC listed above.

Initial _____

Using the data entered in Section 2, complete the chart below to find the percentage of subscribers de-enrolled for this ETC.

$\mathbf{M} = (\mathbf{F} + \mathbf{K})$	N = (J+L)	$O = ((N \div M) * 100)$
Number of subscribers that the ETC attempted to recertify directly or through a state administrator, ETC access to a state database, or by USAC (This should equal the number reported in Block E)	Number of subscribers de-enrolled or scheduled to be de-enrolled as a result of non-response or ineligibility	Percentage of subscribers de-enrolled or scheduled to be de-enrolled as a result of ineligibility or non-response
126	68	54

Section 4: ETCs Subject to the Non-Usage Requirements

All ETCs must complete the appropriate check-box. ETCs that do not assess and collect a monthly fee from their Lifeline subscribers are subject to the non-usage requirements. ETCs subject to the non-usage requirements must indicate the number of subscribers de-enrolled by month in Section 4. ETCs that only assess a fee but do not collect such fees are subject to the non-usage requirements and must also indicate the number of subscribers de-enrolled by month.

Is the ETC subject to the non-usage requirements? Yes No 🗵

If yes, record the number of subscribers de-enrolled for non-usage by month in Block Q below.

P	Q
Month	Subscribers De-Enrolled for Non-Usage
January	0
February	0
March	0
April	0
May	0
June	0
July	0
August	0
September	0
October	0
November	0
December	0
Total Subscribers	0

Signature Block

01 114 11
Staci Malikowski
Chief Financial Officer
Printed Name and Title of Officer
1-31-17
Date
218-346-8446
Contact Phone Number

SAC	Name
361385	East Otter Tail Telephone Company
361491	Twin Valley Telephone Company
361365	Callaway Telephone Company, Inc.
361431	Midwest Telephone Company
361448	Osakis Telephone Company
361453	The Peoples Telephone Co. of Bigfork
361408	Home Telephone Company
361430	Melrose Telephone Company
361472	Redwood County Telephone Company
361443	Loretel Systems Inc.
361391	
361374	Felton Telephone Company
361383	Arrowhead Communications Corporation
361372	Eagle Valley Telephone Company
	Clements Telephone Co.

All carriers must complete all or portions of all sections
Form must be submitted to USAC and filed with the Federal Communications Commission

IMPORTANT: PLEASE READ INSTRUCTIONS FIRST

		142002440	
Study Area Code (SAC) (An Eligible Telecommunications Carrier (ETC) must provide a continuous cont		Service Provider Identification Number (SPIN) a certification form for each SAC through which it provides Lifeline service).	
201 6			
Recertification Year	State	ETC Name	
Arvig		Arvig Enterprises, Inc.	
DBA, Marketing, or Ot same as ETC name, list "No	her Branding Name /A" Do <u>not</u> leave blank)	Holding Company Name (If same as ETC name, list "N/A" Do not leave blank)	
Does the reporting comp	any have affiliated ETCs?	Yes 🕱 No	
were mined in accordance with D	section 5(2) of the Communications	using page 4 and additional sheets if necessary. Affiliation shall be Act. That Section defines "affiliate" as "a person that (directly or indirectly) nership or control with, another person." 47 U.S.C. § 153(2). See also 47	
Affiliated ETC's SAC		Affiliated ETC's Name	
See attached workshee	et		
For purposes of this filing	2. an officer is an occupant		
laws (or partnership agreem comptroller, treasurer, or a comptroller, treasurer, or a comptroller	legal document. An officer is sent), and would typically be p	a person who occupies a position specified in the corporate by- resident, vice president for operations, vice president for finance, er is a sole proprietorship, the owner must sign the certification.	
laws (or partnership agreem comptroller, treasurer, or a comptroller treasurer or a comptroller treasu	legal document. An officer is nent), and would typically be promparable position. If the file	a person who occupies a position specified in the corporate by- resident, vice president for operations, vice president for finance, er is a sole proprietorship, the owner must sign the certification. this section	
laws (or partnership agreem comptroller, treasurer, or a comptroller. Section 1: Initial Certain Cert	tification All ETCs must complete to sted above has certification pro- gram-based eligibility document knowledge, the company was	a person who occupies a position specified in the corporate by- resident, vice president for operations, vice president for finance, er is a sole proprietorship, the owner must sign the certification. this section cedures in place to:	
laws (or partnership agreem comptroller, treasurer, or a comptroller, treasurer, or a comptroller. Section 1: Initial Certain	tification All ETCs must complete to steed above has certification program-based eligibility document knowledge, the company was ased eligibility prior to his or hearth.	a person who occupies a position specified in the corporate by- resident, vice president for operations, vice president for finance, er is a sole proprietorship, the owner must sign the certification. this section cedures in place to: tation prior to enrolling a consumer in the Lifeline program, and presented with documentation of each consumer's household her enrollment in Lifeline; and/or	
laws (or partnership agreem comptroller, treasurer, or a comptroller, treasurer, or a comptroller. Section 1: Initial Certal Certain Section 1: Initial Cer	tification All ETCs must complete to sted above has certification program-based eligibility document knowledge, the company was ased eligibility prior to his or bility by relying upon access or to enrolling a consumer in the	tation prior to enrolling a consumer in the Lifeline program, and a presented with documentation of each consumer's household her enrollment in Lifeline; and/or	

Do not leave empty blocks. If an ETC has nothing to report in a block, enter a zero.

A	В	С	D	E = (A - B - C - D)
Number of subscribers claimed on February FCC Form 497 of current Form 555 calendar year (February data month)	Number of lines claimed on February FCC Form 497 of current Form 555 calendar year provided to wireline resellers	Number of subscribers claimed on the February FCC Form 497 that were initially enrolled in the current Form 555 calendar year (These subscribers did not have Lifeline service prior to January 1 of the current 555 calendar year.)	Number of subscribers de-enrolled <u>prior</u> to recertification attempt by either the ETC, a state administrator, access to an eligibility database, or by USAC	Number of
82	Ø	5	a	75

Recertification Results:

F	G	H = (F-G)	I	J = (H+I)
Number of subscribers ETC contacted directly to recertify eligibility through attestation	Number of subscribers responding to ETC contact	Number of non- responding subscribers	Number of subscribers responding that they are no longer eligible (This should be a subset of Block G.)	Number of subscribers de- enrolled or scheduled to be de-enrolled as a result of non-response or response of ineligibility from ETC recertification attempt
Ø	Ø	Ø	Ø	Ø

K	L
Number of subscribers whose eligibility was reviewed by state administrator, ETC access to eligibility database, or by USAC	Number of subscribers de-enrolled or scheduled to be de-enrolled as a result of finding of ineligibility by state administrator, ETC access to eligibility database, or USAC
46	29

Note: If any subscriber was reviewed by an ETC accessing a state database or by a state administrator and subsequently contacted directly by the ETC in an attempt to recertify eligibility, those subscribers should be listed in Blocks F through J as appropriate and not in Blocks K and L. As a result, all subscribers subject to recertification who were not de-enrolled prior to the recertification attempt must be accounted for in Block F or Block K.

The total of Block F and Block K should equal the number reported in Block E.

Certification:

Based on the data entered above, initial the certification(s) below that apply. Both Certification A and B may apply depending on the recertification procedures in place for the SAC reporting on this form. If Certification C applies, neither Certification A nor B may apply.

A) I certify that the company listed above has procedures in place to recertify the continued eligibility of all of its Lifeline subscribers, and that, to the best of my knowledge, the company obtained signed certifications from all subscribers attesting to their continuing eligibility for Lifeline. Results are provided in the chart above in Blocks F through J. I am an officer of the company named above. I am authorized to make this certification for the SAC listed above.

Initial ____

AND/OR

B) I certify that the company listed above has procedures in place to recertify consumer eligibility by relying on: 1.5 A C

(List database or name of administrator here)

Results are provided in the chart above in Blocks K through L. I am an officer of the company named above. I am authorized to make this certification for the

SAC listed above.

Initial SM___

OR

T .	4.0		
Inı	tial		
***	1141	l .	

Using the data entered in Section 2, complete the chart below to find the percentage of subscribers de-enrolled for this ETC.

$\mathbf{M} = (\mathbf{F} + \mathbf{K})$	N = (J+L)	$O = ((N \div M) * 100)$
Number of subscribers that the ETC attempted to recertify directly or through a state administrator, ETC access to a state database, or by USAC (This should equal the number reported in Block E)	Number of subscribers de-enrolled or scheduled to be de-enrolled as a result of non-response or ineligibility	Percentage of subscribers de-enrolled or scheduled to be de-enrolled as a result of ineligibility or non-response
46	29	63

Section 4: ETCs Subject to the Non-Usage Requirements

All ETCs must complete the appropriate check-box. ETCs that do not assess and collect a monthly fee from their Lifeline subscribers are subject to the non-usage requirements. ETCs subject to the non-usage requirements must indicate the number of subscribers de-enrolled by month in Section 4. ETCs that only assess a fee but do not collect such fees are subject to the non-usage requirements and must also indicate the number of subscribers de-enrolled by month.

Is the ETC subject to the non-usage requirements? Yes No

If yes, record the number of subscribers de-enrolled for non-usage by month in Block Q below.

P	Q	
Month	Subscribers De-Enrolled for Non-Usage	
January	0	
February	0	
March	0	
April	0	
May	0	
June	0	
July	0	
August	0	
September	0	
October	0	
November	0	
December	0	
Total Subscribers	0	

Signature Block

Signed,	Staci Malikowski	
Certified Online Signature of Officer	Chief Financial Officer Printed Name and Title of Officer	
Staci.malikowski@arvig.com	1-31-17	
Email Address of Officer	Date	
Loretta Tastad	218-346-8446	
Person Completing This Certification Form	Contact Phone Number	

AC	Name
361385	East Otter Tail Telephone Company
361491	Twin Valley Telephone Company
361365	Callaway Telephone Company, Inc.
361431	Midwest Telephone Company
361448	Osakis Telephone Company
361453	The Peoples Telephone Co. of Bigfork
361408	Home Telephone Company
361430	Melrose Telephone Company
361472	Redwood County Telephone Company
361443	Loretel Systems Inc.
361391	Felton Telephone Company
361374	Arrowhead Communications Corporation
361383	Eagle Valley Telephone Company
361372	Clements Telephone Co.

All carriers must complete all or portions of all sections
Form must be submitted to USAC and filed with the Federal Communications Commission

IMPORTANT: PLEASE READ INSTRUCTIONS FIRST

361448		143002126
Study Area Code (SAC) (An Eligible Telecommunications Carrier (ETC) must provide a co		Service Provider Identification Number (SPIN) sertification form for each SAC through which it provides Lifeline service).
201 6 MN		Osakis Telephone Company
Recertification Year	State	ETC Name
Arvig		Arvig Enterprises, Inc.
DBA, Marketing, or Ot (If same as ETC name, list "N	her Branding Name /A" Do <u>not</u> leave blank)	Holding Company Name (If same as ETC name, list "N/A" Do not leave blank)
Does the reporting comp	any have affiliated ETCs?	Yes No No
aetermined in accordance with S	Section $3(2)$ of the Communications .	using page 4 and additional sheets if necessary. Affiliation shall be Act. That Section defines "affiliate" as "a person that (directly or indirectly) nership or control with, another person." 47 U.S.C. § 153(2). See also 47
Affiliated ETC's SAC		Affiliated ETC's Name
See attached workshee	et	
laws (or partnership agreem comptroller, treasurer, or a comptroller)	legal document. An officer is nent), and would typically be p	of a position listed in the article of incorporation, articles of a person who occupies a position specified in the corporate by- resident, vice president for operations, vice president for finance, er is a sole proprietorship, the owner must sign the certification.
-	sted above has certification pro	
A) Review income and prog that, to the best of my	gram-based eligibility documen knowledge, the company was	ntation prior to enrolling a consumer in the Lifeline program, and is presented with documentation of each consumer's household ther enrollment in Lifeline; and/or
B) Confirm consumer eligi Lifeline administrator pri	bility by relying upon access or to enrolling a consumer in t	to a state database and/or notice of eligibility from the state he Lifeline program.
I am an officer of the compabove.	any named above. I am autho	orized to make this certification for the Study Area Code listed
Initial <u>SM</u>		

Do not leave empty blocks. If an ETC has nothing to report in a block, enter a zero.

A	В	С	D	E = (A - B - C - D)
Number of subscribers claimed on February FCC Form 497 of current Form 555 calendar year (February data month)	Number of lines claimed on February FCC Form 497 of current Form 555 calendar year provided to wireline resellers	Number of subscribers claimed on the February FCC Form 497 that were initially enrolled in the current Form 555 calendar year (These subscribers did not have Lifeline service prior to January 1 of the current 555 calendar year.)	Number of subscribers de-enrolled <u>prior</u> to recertification attempt by either the ETC, a state administrator, access to an eligibility database, or by USAC	Number of subscribers ETC is responsible for recertifying for current Form 555 calendar year
29	Ø	3	3	24

Recertification Results:

F	G	H = (F-G)	I	$\mathbf{J} = (\mathbf{H} + \mathbf{I})$
Number of subscribers ETC contacted directly to recertify eligibility through attestation	Number of subscribers responding to ETC contact	Number of non- responding subscribers	Number of subscribers responding that they are no longer eligible (This should be a subset of Block G.)	Number of subscribers de- enrolled or scheduled to be de-enrolled as a result of non-response or response of ineligibility from ETC recertification attempt
Ø	Ø	Ø	Ø	Ø

K	L
Number of subscribers whose eligibility was reviewed by state administrator, ETC access to eligibility database, or by USAC	Number of subscribers de-enrolled or scheduled to be de-enrolled as a result of finding of ineligibility by state administrator, ETC access to eligibility database, or USAC
14	10

Note: If any subscriber was reviewed by an ETC accessing a state database or by a state administrator and subsequently contacted directly by the ETC in an attempt to recertify eligibility, those subscribers should be listed in Blocks F through J as appropriate and not in Blocks K and L. As a result, all subscribers subject to recertification who were not de-enrolled prior to the recertification attempt must be accounted for in Block F or Block K.

The total of Block F and Block K should equal the number reported in Block F.

Certification:

Based on the data entered above, initial the certification(s) below that apply. Both Certification A and B may apply depending on the recertification procedures in place for the SAC reporting on this form. If Certification C applies, neither Certification A nor B may apply.

A) I certify that the company listed above has procedures in place to recertify the continued eligibility of all of its Lifeline subscribers, and that, to the best of my knowledge, the company obtained signed certifications from all subscribers attesting to their continuing eligibility for Lifeline. Results are provided in the chart above in Blocks F through J. I am an officer of the company named above. I am authorized to make this certification for the SAC listed above.

Initial

AND/OR

B) I certify that the company listed above has procedures in place to recertify consumer eligibility by relying on:

(List database or name of administrator here)

Results are provided in the chart above in Blocks K through L. I am an officer of the company named above. I am authorized to make this certification for the

SAC listed above.

Initial SM

OR

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ntia		
	itia	iitial

Using the data entered in Section 2, complete the chart below to find the percentage of subscribers de-enrolled for this ETC.

$\mathbf{M} = (\mathbf{F} + \mathbf{K})$	N = (J+L)	$O = ((N \div M) * 100)$
Number of subscribers that the ETC attempted to recertify directly or through a state administrator, ETC access to a state database, or by USAC (This should equal the number reported in Block E)	Number of subscribers de-enrolled or scheduled to be de-enrolled as a result of non-response or ineligibility	Percentage of subscribers de-enrolled or scheduled to be de-enrolled as a result of ineligibility or non-response
14	10	72

Section 4: ETCs Subject to the Non-Usage Requirements

All ETCs must complete the appropriate check-box. ETCs that do not assess and collect a monthly fee from their Lifeline subscribers are subject to the non-usage requirements. ETCs subject to the non-usage requirements must indicate the number of subscribers de-enrolled by month in Section 4. ETCs that only assess a fee but do not collect such fees are subject to the non-usage requirements and must also indicate the number of subscribers de-enrolled by month.

Is the ETC subject to the non-usage requirements? Yes No 🛛

If yes, record the number of subscribers de-enrolled for non-usage by month in Block Q below.

P	Q
Month	Subscribers De-Enrolled for Non-Usage
January	0
February	0
March	0
April	0
May	0
June	0
July	0
August	0
September	0
October	0
November	0
December	0
Total Subscribers	0

Signature Block

By signing below, I certify that the company listed above is in complia	
procedures. I am an officer of the company named above. I am auth	norized to make this certification for the
Study Area Code (SAC) listed above.	

Signed,	
	Staci Malikowski
Certified Online Signature of Officer	Chief Financial Officer Printed Name and Title of Officer
Staci.malikowski@arvig.com	1-31-17
Email Address of Officer	Date
Loretta Tastad	218-346-8446_
Person Completing This Certification Form	Contact Phone Number

264205	Name
361385	East Otter Tail Telephone Company
361491	Twin Valley Telephone Company
361365	Callaway Telephone Company, Inc.
361431	Midwest Telephone Company
361448	Osakis Telephone Company
361453	The Peoples Telephone Co. of Bigfork
361408	Home Telephone Company
361430	Melrose Telephone Company
361472	Redwood County Telephone Company
361443	Loretel Systems Inc.
361391	Felton Telephone Company
361374	Arrowhead Communications Corporation
361383	Eagle Valley Telephone Company
361372	Clements Telephone Co.

All carriers must complete all or portions of all sections
Form must be submitted to USAC and filed with the Federal Communications Commission

IMPORTANT: PLEASE READ INSTRUCTIONS FIRST

20115	
361453	143002129
Study Area Code (SAC)	Service Provider Identification Number (SPIN)
(An Eligible Telecommunications Carrier (ETC) must provide a co	ertification form for each SAC through which it provides Lifeline service).
201 b MN	The Peoples Telephone Co of Bigfork
Recertification Year State	ETC Name
Arvig	Arvig Enterprises, Inc.
DBA, Marketing, or Other Branding Name (If same as ETC name, list "N/A" Do not leave blank)	Holding Company Name (If same as ETC name, list "N/A" Do not leave blank)
Does the reporting company have affiliated ETCs?	Yes No No
Provide a list of all ETCs that are affiliated with the reporting ETC, determined in accordance with Section 3(2) of the Communications A owns or controls, is owned or controlled by, or is under common own C.F.R. § 76.1200.	using page 4 and additional sheets if necessary. Affiliation shall be Act. That Section defines "affiliate" as "a person that (directly or indirectly) nership or control with, another person." 47 U.S.C. § 153(2). See also 47
Affiliated ETC's SAC	Affiliated ETC's Name
See attached worksheet	
formation, or other similar legal document. An officer is laws (or partnership agreement), and would typically be properties.	of a position listed in the article of incorporation, articles of a person who occupies a position specified in the corporate by- resident, vice president for operations, vice president for finance, er is a sole proprietorship, the owner must sign the certification.
I certify that the company listed above has certification pro	cedures in place to:
A) Review income and program-based eligibility documen that, to the best of my knowledge, the company was income and/or program-based eligibility prior to his or h	tation prior to enrolling a consumer in the Lifeline program, and a presented with documentation of each consumer's household her enrollment in Lifeline; and/or
B) Confirm consumer eligibility by relying upon access Lifeline administrator prior to enrolling a consumer in the	to a state database and/or notice of eligibility from the state he Lifeline program.
I am an officer of the company named above. I am autho above.	orized to make this certification for the Study Area Code listed
Initial SM	

Do not leave empty blocks. If an ETC has nothing to report in a block, enter a zero.

A	В	С	D	$\mathbf{E} = (\mathbf{A} - \mathbf{B} - \mathbf{C} - \mathbf{D})$
Number of subscribers claimed on February FCC Form 497 of current Form 555 calendar year (February data month)	Number of lines claimed on February FCC Form 497 of current Form 555 calendar year provided to wireline resellers	Number of subscribers claimed on the February FCC Form 497 that were initially enrolled in the current Form 555 calendar year (These subscribers did not have Lifeline service prior to January 1 of the current 555 calendar year.)	Number of subscribers de-enrolled <u>prior</u> to recertification attempt by either the ETC, a state administrator, access to an eligibility database, or by USAC	Number of subscribers ETC is responsible for recertifying for current Form 555 calendar year
33	Ø		1	31

Recertification Results:

F	G	H = (F-G)	I	J = (H+I)
Number of subscribers ETC contacted directly to recertify eligibility through attestation	Number of subscribers responding to ETC contact	Number of non- responding subscribers	Number of subscribers responding that they are no longer eligible (This should be a subset of Block G.)	Number of subscribers de- enrolled or scheduled to be de-enrolled as a result of non-response or response of ineligibility from ETC recertification attempt
Ø	Ø	Ø	Ø	6

K	L
Number of subscribers whose eligibility was reviewed by state administrator, ETC access to eligibility database, or by USAC	Number of subscribers de-enrolled or scheduled to be de-enrolled as a result of finding of ineligibility by state administrator, ETC access to eligibility database, or USAC
19	12

Note: If any subscriber was reviewed by an ETC accessing a state database or by a state administrator and subsequently contacted directly by the ETC in an attempt to recertify eligibility, those subscribers should be listed in Blocks F through J as appropriate and not in Blocks K and L. As a result, all subscribers subject to recertification who were not de-enrolled prior to the recertification attempt must be accounted for in Block F or Block K.

The total of Block F and Block K should equal the number reported in Block

Certification:

Based on the data entered above, initial the certification(s) below that apply. Both Certification A and B may apply depending on the recertification procedures in place for the SAC reporting on this form. If Certification C applies, neither Certification A nor B may apply.

A) I certify that the company listed above has procedures in place to recertify the continued eligibility of all of its Lifeline subscribers, and that, to the best of my knowledge, the company obtained signed certifications from all subscribers attesting to their continuing eligibility for Lifeline. Results are provided in the chart above in Blocks F through J. I am an officer of the company named above. I am authorized to make this certification for the SAC listed above.

Initial

AND/OR

B) I certify that the company listed above has procedures in place to recertify consumer eligibility by relying on:

(List database or name of administrator here)

Results are provided in the chart above in Blocks K through L. I am an officer of the company named above. I am authorized to make this certification for the SAC listed above.

Initial SM

OR

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In	iti	പ
		7

Using the data entered in Section 2, complete the chart below to find the percentage of subscribers de-enrolled for this ETC.

$\mathbf{M} = (\mathbf{F} + \mathbf{K})$	N = (J+L)	$O = ((N \div M) * 100)$
Number of subscribers that the ETC attempted to recertify directly or through a state administrator, ETC access to a state database, or by USAC (This should equal the number reported in Block E)	Number of subscribers de-enrolled or scheduled to be de-enrolled as a result of non-response or ineligibility	Percentage of subscribers de-enrolled or scheduled to be de-enrolled as a result of ineligibility or non-response
19	12	104

Section 4: ETCs Subject to the Non-Usage Requirements

All ETCs must complete the appropriate check-box. ETCs that do not assess and collect a monthly fee from their Lifeline subscribers are subject to the non-usage requirements. ETCs subject to the non-usage requirements must indicate the number of subscribers de-enrolled by month in Section 4. ETCs that only assess a fee but do not collect such fees are subject to the non-usage requirements and must also indicate the number of subscribers de-enrolled by month.

Is the ETC subject to the non-usage requirements? Yes \(\subseteq \text{No} \(\subseteq \)

If yes, record the number of subscribers de-enrolled for non-usage by month in $Block\ Q$ below.

P	Q
Month	Subscribers De-Enrolled for Non-Usage
January	0
February	0
March	0
April	0
May	0
June	0
July	0
August	0
September	0
October	0
November	0
December	0
Total Subscribers	0

Signature Block

Signed,	Staci Malikowski
Certified Online Signature of Officer	Chief Financial Officer Printed Name and Title of Officer
Staci.malikowski@arvig.com	1-31-17
Email Address of Officer	Date
Loretta Tastad	218-346-8446
Person Completing This Certification Form	Contact Phone Number

SAC	Name
361385	East Otter Tail Telephone Company
361491	Twin Valley Telephone Company
361365	Callaway Telephone Company, Inc.
361431	Midwest Telephone Company
361448	Osakis Telephone Company
361453	The Peoples Telephone Co. of Bigfork
361408	Home Telephone Company
361430	Melrose Telephone Company
361472	Redwood County Telephone Company
361443	Loretel Systems Inc.
361391	Felton Telephone Company
361374	Arrowhead Communications Corporation
361383	Fagle Valley Telephone Company
361372	Clements Telephone Co
	Cientents releptione Co

All carriers must complete all or portions of all sections
Form must be submitted to USAC and filed with the Federal Communications Commission

IMPORTANT: PLEASE READ INSTRUCTIONS FIRST

361472		143002132
Study Area Code (SAC (An Eligible Telecommunica	*	Service Provider Identification Number (SPIN) ertification form for each SAC through which it provides Lifeline service).
201 6	MN	Redwood County Telephone Company
Recertification Year	State	ETC Name
Arvig		Arvig Enterprises, Inc.
DBA, Marketing, or Ot (If same as ETC name, list "N.		Holding Company Name (If same as ETC name, list "N/A" Do not leave blank)
Does the reporting comp	any have affiliated ETCs?	Yes No
determined in accordance with S	Section $3(2)$ of the Communications A	using page 4 and additional sheets if necessary. Affiliation shall be lct. That Section defines "affiliate" as "a person that (directly or indirectly) tership or control with, another person." 47 U.S.C. § 153(2). See also 47
Affiliated ETC's SAC		Affiliated ETC's Name
See attached workshee	et	
formation, or other similar laws (or partnership agreem comptroller, treasurer, or a comptroller)	legal document. An officer is nent), and would typically be properties that the properties of the prop	of a position listed in the article of incorporation, articles of a person who occupies a position specified in the corporate by- resident, vice president for operations, vice president for finance, r is a sole proprietorship, the owner must sign the certification.
I certify that the company lis	sted above has certification pro	cedures in place to:
that, to the best of my	knowledge, the company was	tation prior to enrolling a consumer in the Lifeline program, and presented with documentation of each consumer's household are enrollment in Lifeline; and/or
B) Confirm consumer eligi Lifeline administrator pri	bility by relying upon access for to enrolling a consumer in the	to a state database and/or notice of eligibility from the state ne Lifeline program.
am an officer of the compabove.	oany named above. I am autho	rized to make this certification for the Study Area Code listed
Initial SM		

Do not leave empty blocks. If an ETC has nothing to report in a block, enter a zero.

A	В	С	D	E = (A - B - C - D)
Number of subscribers claimed on February FCC Form 497 of current Form 555 calendar year (February data month)	Number of lines claimed on February FCC Form 497 of current Form 555 calendar year provided to wireline resellers	Number of subscribers claimed on the February FCC Form 497 that were initially enrolled in the current Form 555 calendar year (These subscribers did not have Lifeline service prior to January 1 of the current 555 calendar year.)	Number of subscribers de-enrolled <u>prior</u> to recertification attempt by either the ETC, a state administrator, access to an eligibility database, or by USAC	Number of subscribers ETC is responsible for recertifying for current Form 555 calendar year
42	Ø	2	D C	38

Recertification Results:

F	G	H = (F-G)	I	J = (H+I)
Number of subscribers ETC contacted directly to recertify eligibility through attestation	Number of subscribers responding to ETC contact	Number of non- responding subscribers	Number of subscribers responding that they are no longer eligible (This should be a subset of Block G.)	Number of subscribers de- enrolled or scheduled to be de-enrolled as a result of non-response or response of ineligibility from ETC recertification attempt
Ø	Ø	Ø	Ø	Ø

K	L
Number of subscribers whose eligibility was reviewed by state ad ministrator, ETC access to eligibility database, or by USAC	Number of subscribers de-enrolled or scheduled to be de-enrolled as a result of finding of ineligibility by state administrator, ETC access to eligibility database, or USAC
26	13

Note: If any subscriber was reviewed by an ETC accessing a state database or by a state administrator and subsequently contacted directly by the ETC in an attempt to recertify eligibility, those subscribers should be listed in Blocks F through J as appropriate and not in Blocks K and L. As a result, all subscribers subject to recertification who were not de-enrolled prior to the recertification attempt must be accounted for in Block F or Block K.

The total of Block F and Block K should equal the number reported in Block E.

Certification:

Based on the data entered above, initial the certification(s) below that apply. Both Certification A and B may apply depending on the recertification procedures in place for the SAC reporting on this form. If Certification C applies, neither Certification A nor B may apply.

A) I certify that the company listed above has procedures in place to recertify the continued eligibility of all of its Lifeline subscribers, and that, to the best of my knowledge, the company obtained signed certifications from all subscribers attesting to their continuing eligibility for Lifeline. Results are provided in the chart above in Blocks F through J. I am an officer of the company named above. I am authorized to make this certification for the SAC listed above.

Initial _____

AND/OR

B) I certify that the company listed above has procedures in place to recertify consumer eligibility by relying on:

(List database or name of administrator here)

Results are provided in the chart above in Blocks K through L. I am an officer of the company named above. I am authorized to make this certification for the SAC listed above.

Initial SM

OR

Initial		
Initiai		

Using the data entered in Section 2, complete the chart below to find the percentage of subscribers de-enrolled for this ETC.

M = (F+K)	N = (J+L)	$O = ((N \div M) * 100)$
Number of subscribers that the ETC attempted to recertify directly or through a state administrator, ETC access to a state database, or by USAC (This should equal the number reported in Block E)	Number of subscribers de-enrolled or scheduled to be de-enrolled as a result of non-response or ineligibility	Percentage of subscribers de-enrolled or scheduled to be de-enrolled as a result of ineligibility or non-response
26	12	47

Section 4: ETCs Subject to the Non-Usage Requirements

All ETCs must complete the appropriate check-box. ETCs that do not assess and collect a monthly fee from their Lifeline subscribers are subject to the non-usage requirements. ETCs subject to the non-usage requirements must indicate the number of subscribers de-enrolled by month in Section 4. ETCs that only assess a fee but do not collect such fees are subject to the non-usage requirements and must also indicate the number of subscribers de-enrolled by month.

Is the ETC subject to the non-usage requirements? Yes No 🗵

If yes, record the number of subscribers de-enrolled for non-usage by month in $Block\ Q$ below.

P	Q
Month	Subscribers De-Enrolled for Non-Usage
January	0
February	0
March	0
April	0
May	0
June	0
July	0
August	0
September	0
October	0
November	0
December	0
Total Subscribers	0

Signature Block

Signed,	Staci Malikowski
Continue de Continue	Ctdo/ Wdilltowott
Certified Online	Chief Financial Officer
Signature of Officer	Printed Name and Title of Officer
Staci.malikowski@arvig.com	1-31-17
Email Address of Officer	Date
Loretta Tastad	218-346-8446
Person Completing This Certification Form	Contact Phone Number

SAC	Name
361385	East Otter Tail Telephone Company
361491	Twin Valley Telephone Company
361365	Callaway Telephone Company, Inc.
361431	Midwest Telephone Company
361448	Osakis Telephone Company
361453	The Peoples Telephone Co. of Bigfork
361408	Home Telephone Company
361430	Melrose Telephone Company
361472	Redwood County Telephone Company
361443	Loretel Systems Inc.
361391	Felton Telephone Company
361374	Arrowhead Communications Corporation
361383	Eagle Valley Telephone Company
361372	Clements Telephone Co.
	Ciemenis releptione Co.

All carriers must complete all or portions of all sections
Form must be submitted to USAC and filed with the Federal Communications Commission

IMPORTANT: PLEASE READ INSTRUCTIONS FIRST

369007		143019685
Study Area Code (SAC)		Service Provider Identification Number (SPIN)
(An Eligible Telecommunical	tions Carrier (ETC) must provide a c	vertification form for each SAC through which it provides Lifeline service).
2016	MN	Tekstar Communications, Inc.
Recertification Year	State	ETC Name
Arvig		Arvig Enterprises, Inc.
DBA, Marketing, or Otl (If same as ETC name, list "N/		Holding Company Name (If same as ETC name, list "N/A" Do not leave blank)
Provide a list of all ETCs that ar determined in accordance with S	ection 3(2) of the Communications 2	Yes No Using page 4 and additional sheets if necessary. Affiliation shall be Act. That Section defines "affiliate" as "a person that (directly or indirectly) nership or control with, another person." 47 U.S.C. § 153(2). See also 47
Affiliated ETC's SAC		Affiliated ETC's Name
See attached workshee	et	
laws (or partnership agreem comptroller, treasurer, or a c	legal document. An officer is ent), and would typically be properties.	of a position listed in the article of incorporation, articles of a person who occupies a position specified in the corporate by- resident, vice president for operations, vice president for finance, er is a sole proprietorship, the owner must sign the certification. his section
I certify that the company lis	ted above has certification pro	ocedures in place to:
A) Review income and prog that, to the best of my l	ram-based eligibility documen knowledge, the company was	station prior to enrolling a consumer in the Lifeline program, and so presented with documentation of each consumer's household ther enrollment in Lifeline; and/or
B) Confirm consumer eligil Lifeline administrator pri	bility by relying upon access or to enrolling a consumer in the	to a state database and/or notice of eligibility from the state he Lifeline program.
I am an officer of the compabove.	any named above. I am autho	orized to make this certification for the Study Area Code listed
Initial SM		

Do not leave empty blocks. If an ETC has nothing to report in a block, enter a zero.

A	В	С	D	E = (A - B - C - D)
Number of subscribers claimed on February FCC Form 497 of current Form 555 calendar year (February data month)	Number of lines claimed on February FCC Form 497 of current Form 555 calendar year provided to wireline resellers	Number of subscribers claimed on the February FCC Form 497 that were initially enrolled in the current Form 555 calendar year (These subscribers did not have Lifeline service prior to January 1 of the current 555 calendar year.)	Number of subscribers de-enrolled <u>prior</u> to recertification attempt by either the ETC, a state administrator, access to an eligibility database, or by USAC	Number of subscribers ETC is responsible for recertifying for current Form 555 calendar year
442	Ø	19	25	398

Recertification Results:

F	G	H = (F-G)	I	J = (H+I)
Number of subscribers ETC contacted directly to recertify eligibility through attestation	Number of subscribers responding to ETC contact	Number of non- responding subscribers	Number of subscribers responding that they are no longer eligible (This should be a subset of Block G.)	Number of subscribers de- enrolled or scheduled to be de-enrolled as a result of non-response or response of ineligibility from ETC recertification attempt
\(\psi \)	Ø	Ø	Ø	Ø

K	L
Number of subscribers whose eligibility was reviewed by state administrator, ETC access to eligibility database, or by USAC	Number of subscribers de-enrolled or scheduled to be de-enrolled as a result of finding of ineligibility by state administrator, ETC access to eligibility database, or USAC
248	150

Note: If any subscriber was reviewed by an ETC accessing a state database or by a state administrator and subsequently contacted directly by the ETC in an attempt to recertify eligibility, those subscribers should be listed in Blocks F through J as appropriate and not in Blocks K and L. As a result, all subscribers subject to recertification who were not de-enrolled prior to the recertification attempt must be accounted for in Block F or Block K.

The total of Block F and Block K should equal the number reported in Block E.

Certification:

Based on the data entered above, initial the certification(s) below that apply. Both Certification A and B may apply depending on the recertification procedures in place for the SAC reporting on this form. If Certification C applies, neither Certification A nor B may apply.

A) I certify that the company listed above has procedures in place to recertify the continued eligibility of all of its Lifeline subscribers, and that, to the best of my knowledge, the company obtained signed certifications from all subscribers attesting to their continuing eligibility for Lifeline. Results are provided in the chart above in Blocks F through J. I am an officer of the company named above. I am authorized to make this certification for the SAC listed above.

Initial

AND/OR

B) I certify that the company listed above has procedures in place to recertify consumer eligibility by relying on:

(List database or name of administrator here)

Results are provided in the chart above in Blocks K through L. I am an officer of the company named above. I am authorized to make this certification for the

SAC listed above.

Initial <u>SM</u>

OR

iti	

Using the data entered in Section 2, complete the chart below to find the percentage of subscribers de-enrolled for this ETC.

$\mathbf{M} = (\mathbf{F} + \mathbf{K})$	N = (J+L)	$O = ((N \div M) * 100)$
Number of subscribers that the ETC attempted to recertify directly or through a state administrator, ETC access to a state database, or by USAC (This should equal the number reported in Block E)	Number of subscribers de-enrolled or scheduled to be de-enrolled as a result of non-response or ineligibility	Percentage of subscribers de-enrolled or scheduled to be de-enrolled as a result of ineligibility or non-response
248	150	61

Section 4: ETCs Subject to the Non-Usage Requirements

All ETCs must complete the appropriate check-box. ETCs that do not assess and collect a monthly fee from their Lifeline subscribers are subject to the non-usage requirements. ETCs subject to the non-usage requirements must indicate the number of subscribers de-enrolled by month in Section 4. ETCs that only assess a fee but do not collect such fees are subject to the non-usage requirements and must also indicate the number of subscribers de-enrolled by month.

Is the ETC subject to the non-usage requirements? Yes No

If yes, record the number of subscribers de-enrolled for non-usage by month in $Block\ Q$ below.

P	Q
Month	Subscribers De-Enrolled for Non-Usage
January	0
February	0
March	0
April	0
May	0
June	0
July	0
August	0
September	0
October	0
November	0
December	0
Total Subscribers	0

Signature Block

study Area Code (SAC) listed above.	
Signed,	
	Staci Malikowski
Certified Online	Chief Financial Officer
Signature of Officer	Printed Name and Title of Officer
Staci.malikowski@arvig.com	1-31-17
Email Address of Officer	Date
Loretta Tastad	218-346-8446
Person Completing This Certification Form	Contact Phone Number

SAC	Name
361385	East Otter Tail Telephone Company
361491	Twin Valley Telephone Company
361365	Callaway Telephone Company, Inc.
361431	Midwest Telephone Company Midwest Telephone Company
361448	
361453	Osakis Telephone Company
361408	The Peoples Telephone Co. of Bigfork
361430	Home Telephone Company
361472	Melrose Telephone Company
	Redwood County Telephone Company
361443	Loretel Systems Inc
361391	Felton Telephone Company
361374	Arrowhead Communications Corporation
361383	Eagle Valley Telephone Company
361372	Clements Telephone Co.

All carriers must complete all or portions of all sections
Form must be submitted to USAC and filed with the Federal Communications Commission

IMPORTANT: PLEASE READ INSTRUCTIONS FIRST

	31491		143002141
1	ly Area Code (SAC ligible Telecommunica	•	Service Provider Identification Number (SPIN) ertification form for each SAC through which it provides Lifeline service).
20	16	MN	Twin Valley-Ulen Telephone Company
Rece	ertification Year	State	ETC Name
An	/ig		Arvig Enterprises, Inc.
DBA (If san	A, Marketing, or Ot ne as ETC name, list "N	her Branding Name (A" Do <u>not</u> leave blank)	Holding Company Name (If same as ETC name, list "N/A" Do not leave blank)
		any have affiliated ETCs?	Yes No No
determine	d in accordance with S ontrols, is owned or co	Section 3(2) of the Communications .	using page 4 and additional sheets if necessary. Affiliation shall be Act. That Section defines "affiliate" as "a person that (directly or indirectly) nership or control with, another person." 47 U.S.C. § 153(2). See also 47
Affiliate	d ETC's SAC		Affiliated ETC's Name
See	attached workshe	et	
formatio laws (or	n, or other similar partnership agreen ller, treasurer, or a	legal document. An officer is tent), and would typically be p	of a position listed in the article of incorporation, articles of a person who occupies a position specified in the corporate by-president, vice president for operations, vice president for finance, er is a sole proprietorship, the owner must sign the certification.
I certify	that the company li	sted above has certification pro	ocedures in place to:
that,	to the best of my	knowledge, the company was	ntation prior to enrolling a consumer in the Lifeline program, and s presented with documentation of each consumer's household her enrollment in Lifeline; and/or
		bility by relying upon access for to enrolling a consumer in	s to a state database and/or notice of eligibility from the state the Lifeline program.
I am an a	officer of the comp	oany named above. I am autho	prized to make this certification for the Study Area Code listed

Do not leave empty blocks. If an ETC has nothing to report in a block, enter a zero.

A	В	С	D	$\mathbf{E} = (\mathbf{A} - \mathbf{B} - \mathbf{C} - \mathbf{D})$
Number of subscribers claimed on February FCC Form 497 of current Form 555 calendar year (February data month)	Number of lines claimed on February FCC Form 497 of current Form 555 calendar year provided to wireline resellers	Number of subscribers claimed on the February FCC Form 497 that were initially enrolled in the current Form 555 calendar year (These subscribers did not have Lifeline service prior to January 1 of the current 555 calendar year.)	Number of subscribers de-enrolled <u>prior</u> to recertification attempt by either the ETC, a state administrator, access to an eligibility database, or by USAC	Number of subscribers ETC is responsible for recertifying for current Form 555 calendar year
134	Ø	5	4	125

Recertification Results:

F	G	H = (F-G)	I	J = (H+I)
Number of subscribers ETC contacted directly to recertify eligibility through attestation	Number of subscribers responding to ETC contact	Number of non- responding subscribers	Number of subscribers responding that they are no longer eligible (This should be a subset of Block G.)	Number of subscribers de- enrolled or scheduled to be de-enrolled as a result of non-response or response of ineligibility from ETC recertification attempt
Ø	Ø	Ø	Ø	Ø

K	L
Number of subscribers whose eligibility was review ed by state administrator, ETC access to eligibility database, or by USAC	Number of subscribers de-enrolled or scheduled to be de-enrolled as a result of finding of ineligibility by state administrator, ETC access to eligibility database, or USAC
76	49

Note: If any subscriber was reviewed by an ETC accessing a state database or by a state administrator and subsequently contacted directly by the ETC in an attempt to recertify eligibility, those subscribers should be listed in Blocks F through J as appropriate and not in Blocks K and L. As a result, all subscribers subject to recertification who were not de-enrolled prior to the recertification attempt must be accounted for in Block F or Block K.

The total of Block F and Block K should equal the number reported in Block E.

Certification:

Based on the data entered above, initial the certification(s) below that apply. Both Certification A and B may apply depending on the recertification procedures in place for the SAC reporting on this form. If Certification C applies, neither Certification A nor B may apply.

A) I certify that the company listed above has procedures in place to recertify the continued eligibility of all of its Lifeline subscribers, and that, to the best of my knowledge, the company obtained signed certifications from all subscribers attesting to their continuing eligibility for Lifeline. Results are provided in the chart above in Blocks F through J. I am an officer of the company named above. I am authorized to make this certification for the SAC listed above.

Initial _____

AND/OR

B) I certify that the company listed above has procedures in place to recertify consumer eligibility by relying on: $II \leq A \leq A$

(List database or name of administrator here)

Results are provided in the chart above in Blocks K through L. I am an officer of the company named above. I am authorized to make this certification for the SAC listed above.

Initial SM

OR

Initial	

Using the data entered in Section 2, complete the chart below to find the percentage of subscribers de-enrolled for this ETC.

$\mathbf{M} = (\mathbf{F} + \mathbf{K})$	N = (J+L)	$O = ((N \div M) * 100)$
Number of subscribers that the ETC attempted to recertify directly or through a state administrator, ETC access to a state database, or by USAC (This should equal the number reported in Block E)	Number of subscribers de-enrolled or scheduled to be de-enrolled as a result of non-response or ineligibility	Percentage of subscribers de-enrolled or scheduled to be de-enrolled as a result of ineligibility or non-response
76	49	65

Section 4: ETCs Subject to the Non-Usage Requirements

All ETCs must complete the appropriate check-box. ETCs that do not assess and collect a monthly fee from their Lifeline subscribers are subject to the non-usage requirements. ETCs subject to the non-usage requirements must indicate the number of subscribers de-enrolled by month in Section 4. ETCs that only assess a fee but do not collect such fees are subject to the non-usage requirements and must also indicate the number of subscribers de-enrolled by month.

Is the ETC subject to the non-usage requirements? Yes No

If yes, record the number of subscribers de-enrolled for non-usage by month in $Block\ Q$ below.

P	Q
Month	Subscribers De-Enrolled for Non-Usage
January	0
February	0
March	0
April	0
May	0
June	0
July	0
August	0
September	0
October	0
November	0
December	0
Total Subscribers	0

Signature Block

Signed,	Staci Malikowski
Certified Online Signature of Officer	Chief Financial Officer Printed Name and Title of Officer
Staci.malikowski@arvig.com	1-31-17
Email Address of Officer	Date
Loretta Tastad	218-346-8446
Person Completing This Certification Form	Contact Phone Number

SAC	Name	
361385	East Otter Tail Telephone Company	
361491	Twin Valley Telephone Company	
361365	Callaway Telephone Company, Inc.	
361431	Midwest Telephone Company	
361448	Osakis Telephone Company	
361453		
361408	The Peoples Telephone Co. of Bigfork	
361430	Home Telephone Company	
361472	Melrose Telephone Company	
361443	Redwood County Telephone Company	
361391	Loretel Systems Inc.	
361374	Felton Telephone Company	
	Arrowhead Communications Corporation	
361383	Eagle Valley Telephone Company	
361372	Clements Telephone Co.	